Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000098231 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : 360 CORPORATE SOLUTIONS, LLC

Account Number : I20210000090 Phone : (786)269-0183 : (786)513-3264 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MANAGEMENT ZS, LLC

Certificate of Status	0
Certified Copy	0 ,
Page Count	01
Estimated Charge	\$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MANAGEMENT ZS, LLC	tand I to hiller Company as h	Pari apparer on our records	
(14 kmg or trig 1/m	(A Florida Limited Liability	now appears on our records Company)	:/
The Articles of Organization for this Limited Florida document number 1.17000165038	Liability Company were	filed on 08/02/2017	and assign e d
This amendment is submitted to amend the fo	lowing:		. 13
A. If amending name, enter the new name	of the limited liability c	ompany here:	
TRANSPORT Z&S, LLC			一声
The new name must be distinguishable and contain the	words "Limited Liability Cor	npany," the designation "LLC"	or the abbreviation "I &C."
Enter new principal offices address, if appli	cable:		<u> </u>
(Principal office address MUST BE A STRE			
			<u> </u>
			. 171
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	(BOX)		
B. If amending the registered agent and/or agent and/or the new registered office addr		s on our records, <u>enter f</u>	he name of the new register
Name of New Registered Agent:	360 CORPORATE SO	DIJUTIONS, LLC	
New Registered Office Address:	2600 S. Douglas Roac), PH-8	
		Enter Florida street address	
	Coral Gahles	, Flor	rida 33134 Zip Code
	C)	Ù.	Zip Coda
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register provisions of all statutes relative to the pro	ed agent and agree to e per and complete perfo	ict in this capacity. I furt	ther agree to comply with th AT am familiar with and

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

To

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Effective date, if other than the date of filing:		
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	Dated	March 13, 2024
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Signature of a member or authorized representative of a member		

Typed or printed name of signee