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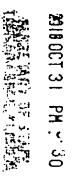
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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COVER LETTER

то:	Registration Sec Division of Corp		,	
	Transport D	ynamics International, LLC		
SUBJI	ECT:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		Brett J. Ostrow		
			Name of Person	
		Construction Dynamics In	ternational	
			Firm/Company	<u>=,</u>
		1411 SW 11th Terrace		
			Address	
		Pompano Beach, FL 33069)	
		ConstructionDynamicsIntl@	City/State and Zip Code	
		E-mail address: (to be used for future annual report notifi	cation)
For fur	ther information co	oncerning this matter, please ca	all:	
Brett J	. Ostrow		954 258-2700	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclose	ed is a check for th	c following amount:		
□ \$2:	5.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Transport Dynamics International, LLC			
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our record a Limited Liability Company)	<u>ds.</u>)	
he Articles of Organization for this Limited Liability Clorida document number 1.18000032969	Company were filed on February 6, 2018	3	_ and assigned
	 .		
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the lin	nited liability company here:		
Construction Dynamics International, LLC			
he new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC	C" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADD	RESS)		
		\$7.5H	100 TA
Outer and an address of smaller bloom		'a 977	ω
Inter new mailing address, if applicable:		1.	-
Mailing address MAY BE A POST OFFICE BOX)			38 (23)
		The Late	
		1	<u>အ</u>
 If amending the registered agent and/or registered agent and/or the new registered office ado 		ls, <u>enter the</u>	e name of the
tgistered agent and/or the new registered office add	a cas here.		
N. CN. D. L. LA			
Name of New Registered Agent:	·		
New Registered Office Address:			
	Enter Florida street addre.	55	
	, FI	lorida	
	City	•	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I 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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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			☐ Remove
			☐ Change
			
			Change
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effective date is listed, the date muster: If the date inserted in this bloom						
nument's effective date on the De			8 4			
record specifies a delayed		not an effectiv	e time, at 12:0	1 a.m. on	the ea	rlier
he 90th day after the rec	ord is filed.					
October 29	2018					
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	Signature of a member or a	uthorized representa	tive of a member			-
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Page 3 of 3

Filing Fee: \$25.00