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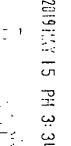
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

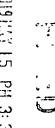
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COVER LETTER

Division of (Corporations		
SUBJECT: Van D	ellen Transport LLC		
	Name of	Limited Liability Company	
	of Amendment and fee(s) are s		
	Timetry R.	Van De llen Name of Person	
	Van Dellen Transp	ort LLC	
		Firm/Company	
	4356 ARL	INGTON RIDGE Address	BLVO
	Lees burg	FC 3474B City/State and Zap Code	
	E-mail address:	le land Yahoo, com	(fication)
For further information of	concerning this matter, please of	call:	(Tellion)
Mothy Va	•	et (<u>920</u>) <u>9/7-</u> Area Code Daytim	9933 e Telephone Number
Enclosed is a check for th	ne following amount		
∑ \$25.00 Filling 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

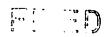
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Registration Section

TO:

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



Van Dellen Transport LLC

2019 MAY 15 PH 3: 34

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on MARCH 2018 and assigned Florida document number L18000071228 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Registered Agents Inc. Name of New Registered Agent: 7901 4th St N STE 300 New Registered Office Address: Enter Florida street address St. Petersburg

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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	JOELLEN M Van Oellen	4356 ARLINGTON RIDGE BLUD	🗆 Add
		LEESBURG FC 34748	⊠ Remove
			Change
			Remove
			Change
			□ Remove
			Change
			🗀 Add
			☐ Remove
			Change
			🗆 Add
			□ Remove
			Change
			🗆 Add
			Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. V.C. alian day (C. alian day
E. Effective date, if other than the date of filing:
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of (b) The 90th day after the record is filed.
Dated <u>(05 - 10</u> , 2019.
Signature of a member or authorized representative of a member
TIMOTHY R. Van Dellen Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00