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(Requestor's Name)	
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(Business Entity Name)	
(Document Number)	
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SECRETARY OF STATE

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COVER LETTER

UBJECT: EALLV	S Blritle Tr	UCKING, LLC ited Liability Gempany	
he enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
lease return all correspond	dence concerning this matter	to the following:	
	Edelvis	Name of Limited Liability Gempany Indiment and fee(s) are submitted for filing. See concerning this matter to the following: ELUVIS BUNHUL Name of Person ELUVIS BUNHUL Firm/Company QC32 Anthony Drvvl Address Tampa, fl 33wg City/State and Zip Code GOUIDUVIS O YARO. COM E-mail address: (to be used for future annual report notification) ming this matter, please call: MHLL at (W3) Area Code Daytime Telephone Number	
			
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	Tarapa, th	33619	
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further information con	cerning this matter, please ca	all:	
Edelvis B	ant le	at (803, 812-0	0110
Name of F	Person		
losed is a check for the	following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

:O'

Registration Section Division of Corporations

> 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

Edlivis Blottle Trucking, LLC

(<u></u>	(A Florida Limited L	iability Company)		
he Articles of Organization for this Limited Li	ability Company	were filed on _	3/20/18	and ass	igned
lorida document number <u>L18</u> 00007190)5			201 SE	
his amendment is submitted to amend the following				2018 DEC 1: SECRETAL	LAND TO
. If amending name, enter the new name of	the limited liab	ility company	<u>here</u> :	まま る	
Blnitle, LLC				28g 2	
e new name must be distinguishable and contain the w	ords "Limited Liabil	ity Company," the	designation "LLC" o	r the abbreviation. L.	L.C."
iter new principal offices address, if applic	able:	2832 K	1vthony Dr A 33619	WE A P	
rincipal office address MUST BE A STREE	T ADDRESS)	Tampa,	fl 53014		
ter new mailing address, if applicable: niling address MAY BE A POST OFFICE If amending the registered agent and/ stered agent and/or the new registered of	or registered of			enter the name	
Name of New Registered Agent: New Registered Office Address:	Jodi to 2832 An Tampa	Enter F	UVL lorida street address, Flori	33019	
		City		Zip Code	

Registered Agent's Signature, if changing Registered Agent:

by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the sions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and t the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability any has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

r 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

<u>itle</u>	Name	<u>Address</u>	Type of Action
GR	Edilvis Blntill	2832 Anthony bruil	Ø Add
		Tampa. fl 33619	Remove
			Change
2R	Jodi Bentle	2832 Anthony Brive Tampa, fi 33619	Add
		Tanpa, 12 336069	Remove
			Change
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		TALCA	Remove
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an effectiv	date, if other thar we date is listed, the dat	e must be specific an	d cannot be prior	to date of filing or mor	optio (optio e than 90 days after t	filing.) Pursuant to	605.0207 (
	he date inserted in the 's effective date on t				requirements, this	date will not be	iisted as t
	d specifies a dela oth day after the			t an effective tir	ne, at 12:01 a	.m. on the ea	rlier of:
r	MCambas	//	2010				
ated $\frac{\nu}{}$	LCOREU	1 1 01	, <u>2017</u>				
		DIUBU	A				-
	()	Signature of a	member or author	orized representative o	r a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00