118000100761

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COVER LETTER

TO: Registration So Division of Cor				
	GHT TAX SERVICES LLC.			
SUBJECT:	Name of Lim	nited Liability Company	<u></u> -	
The such and Antides of	According to the Control of the Cont	on to a fifther		
	Amendment and fee(s) are sub			
Please return all correspo	ondence concerning this matter	to the following:		
	Tracy D Frank			
		Name of Person		
	DirecTax Services		•	
		Firm/Company		
	21-3 Arlington Road Nortl	h	2021 OCT - SECRETAG	
		Address		
	Jacksonville, FL 32211			
		City/State and Zip Code	SE STATE OF	
	E-mail address: (to be used for future annual report not	fication)	
For further information c	concerning this matter, please c	rall:		
Jamine Hansford		904 420-9993 at ()		
Name of Person			e Telephone Number	
Enclosed is a check for the	he following amount:			
☐ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section 1 \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
<u>Mailing Addres</u> Registration		<u>Street Address:</u> Registration Se	ction	
Registration Section Division of Corporations		Division of Cor	rporations	
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Compa (A Florida Limited	i <mark>ny as it now appears on our r</mark> Liability Company)	ecords.)
The Articles of Organization for this Limited I Florida document number L18000100761	Liability Company	were filed on <u>04/23/18</u>	and assigned
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
Green Light Fleet Services, LLC			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:		
(Principal office address MUST BE A STREET ADDRESS)		1435 Windle Street	
		Jacksonville, FL 32209	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Same	2021 OCT - SECRETAN
3. If amending the registered agent and/or igent and/or the new registered office addro		address on our records, <u>e</u>	enter the name of the new regist
Name of New Registered Agent:			
New Registered Office Address:	1435 Windle St	treet	
		Enter Florido street a	uddress
	Jacksonville		_, Florida <u>32209</u>
		City	Zip Code

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

GREEN LIGHT TAX SERVICES LLC.

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 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>Title</u>	<u>Name</u>	Address	Type of Action
			ÜAdd
			□Remove
			Change
			□Remove
			⊑Change
			SE 201 Add
			SE REMARKS
		S S In	S ⊒ Chiange
			Add
			□Remove
			□Change
			□Add
			: □Remove
			□Change
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Article III - Other Provisions - Delete Article III - Other Provisions - correct to say - To conduct any and all lega business services. E. Effective date, if other than the date of filing: ________ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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 September 21 Signature of a member or authorized representative of a member Jaminé Hansford

Typed or printed name of signee