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COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: Pergeron Tree Solutions (= L.C. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person Rergeron Transport Firm/Company
336 E. Hillcrest Street Address Altamonte Spangs F/ 32701
Megan Dish 23 Q y ahoo. Com 2 Granil address: (to be used for future armual report notification)
For further information concerning this matter, please call:
Megan Bish at 401 116 3983 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status & □ Certified Copy
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

Bergeron	ree Solutions L.C.
(Name of the Limited Liabi	lity Company as it now appears on our records.) da Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
Bergeron Transport	LL.C.
The new name must be distinguishable and contain the words "Li	mited 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 ADD	RESSI Altamonte Sociaas = FC132701
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	336 E. Hill crest = 8+ ? Altumonte Springs Fr 32701
B. If amending the registered agent and/or registered agent and/or the new registered office ad-	istered office address on our records, <u>enter the name of the new</u> dress here:
Name of New Registered Agent:	Bryan M. Bergeron
New Registered Office Address: 3	310 t Hillcrest St
A	Enter Florida street address 1 + amon 1 - e Springs Florida 3270 City Zip Code
The thirty of American Birth and the first the first transfer	\$ A

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

<u>Title</u>	Name	Address	Type of Action
MGR	Megan Bish	336 E Hillcrest St	□ Add
	<u>(</u>	336 E Hillcrest St Altamonte Springs FZ	□ Remove
		32701	El Change
			🗆 Add
			□ Remove
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fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing or mo	(optional) ore than 90 days after filing.) Pursuant to 605.020
ote: If the date inserted in this block does not meet the applicable statutory filing cument's effective date on the Department of State's records.	, requirements, this date will not be listed as
record specifies a delayed effective date, but not an effective tile. The 90th day after the record is filed.	me, at 12:01 a.m. on the earlier o
ted January 14th. 2019.	
Signature of a member or authorized representative of	

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Filing Fee: \$25.00