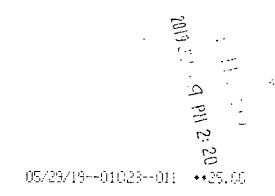
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| (Requestor's Name) |
|--|
| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: KINDERLY ROCAL SILEZ ACIUS CHO HIMEN Javier Pirez |

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COVER LETTER

| TO: | Registration Se Division of Cor | | | | |
|---|------------------------------------|--|---|--|--|
| SUBJEC | GO TE | AM TRUCKING LLC | | | |
| SUBJEC | . l i | Name of Lim | ited Liability Company | | |
| The encl | osed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please re | turn all correspo | ndence concerning this matter | to the following: | | |
| | | KIMBERLY ROD | RIGUEZ | | |
| | | <u> </u> | Name of Person | | |
| | | GO TEAM TRUC | KING LLC | | |
| GO TEAM TRUCKING LLC Firm/Company 144 SW 8TH ST #1205 | | | | | |
| | | 144 SW 8TH ST# | 1205 | | |
| | | | Address | | |
| | | MIAMI, FL 33130 | US | | |
| | | | City/State and Zip Code | | |
| | | goteamtruckinglle@ E-mail address: (| gmail.com to be used for future annual report notifi | cation) | |
| For furth | er information c | oncerning this matter, please c | all: | | |
| KIME | BERLY ROI | DRIGUEZ | 786 972-8039 | | |
| | Name o | f Person | at () Area Code Daytime | Telephone Number | |
| Enclosed | is a check for th | ne following amount: | | | |
| ■ \$25.0 | 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) | |
| | ***** | IVC ADDRESS. | CTDEET/COEDII | ed enabless. | |

MAILING ADDRESS: Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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



June 14, 2019

KIMBERLY RODRIGUEZ GO TEAM TRUCKING LLC 144 SW 8TH ST #1205 MIAMI, FL 33130

SUBJECT: GO TEAM TRUCKING LLC

Ref. Number: L18000183188

We have received your document for GO TEAM TRUCKING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to check which action to take with JAVIER PEREZ in the space provided.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

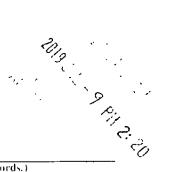
If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 119A00011909

Irene Albritton Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



GO TEAM TRUCKING LLC

(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 Lia | bility Company | were filed on <u>07/31/20</u> | and assigned | | |
|---|---|--|---|--|--|
| Florida document number L18000183188 | | | | | |
| This amendment is submitted to amend the follow | | | | | |
| A. If amending name, enter the new name of | the <u>limited liabi</u> | lity company here: | | | |
| The new name must be distinguishable and contain the wo | 1 | Canana "the decimation | i I C" or the abbreviation "I C" | | |
| | | 144 SW 8TH ST | | | |
| Enter new principal offices address, if applica | | #1205 | | | |
| (Principal office address MUST BE A STREET | " <u>ADDRESS)</u> | MIAMI, FL 33130 US | | | |
| Car a sure and the salahar a franchise | | 144 SW 8TH ST | | | |
| Enter new mailing address, if applicable: | | #1205 | | | |
| (Mailing address MAY BE A POST OFFICE I | <u>107.)</u> | MIAMI, FL 33130 US | | | |
| B. If amending the registered agent and/or registered agent and/or the new registered off Name of New Registered Agent: | <u>ice address her</u> | Y RODRIGUEZ | | | |
| New Registered Office Address: | 144 SW 8TH ST #1205 | | | | |
| | Enter Florida street address | | | | |
| | MIAMI | | _, Florida <u>33130</u> Zip Code | | |
| | | City | гір (оде | | |
| New Registered Agent's Signature, if changing R | | | | | |
| I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the reompany has been notified in writing of this company has been notified in writing of this company. | r and complete vered agent as p egistered office change. | performance of my dutie provided for in Chapter of address, I hereby confir | es, and I am familier with and 605, F.S. Or, if this document is | | |

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 |
|--------------|--------------------|----------------------|----------------|
| MGR | KIMBERLY RODRIGUEZ | 144 SW 8TH ST | |
| | | #1205 | □ Remove |
| | | MIAMI, FL 33130 US | |
| AMBR | JAVIER PEREZ | 230 E 56TH ST | Change |
| | | HIALEAH, FL 33013 US | |
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| ctive | e date, if off | her than the da | te of filing | : | | | (optio | onal) | 465.0 |
| <u>e:</u> If | the date inse | rted in this block | does not m | eet the applic | able statutory | or more ina filing requ | n 90 days after irements, this | ning.) Pursuan date will not | he listed |
| umen | t's effective | date on the Depa | irtment of St | ate's records | | | | | |
| eco. | rd specifie | s a delayed e | ffective d | ato but no | st an effecti | ive time | at 12:01 = | m on the | carlion |
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| | 1/11 | (1) | | | | | | | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00