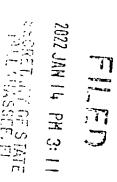
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Y. SCOTT

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COVER LETTER

	gistration Se ision of Cor				
SUBJECT:	FRISNEL 7	TRUCKING LLC			
SUBJECT:		Name of Lin	nited Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return	i all correspo	ndence concerning this matter	to the following:		
		FRISNEL PIERRE			
			Name of Person		
		OWNER			
			Firm/Company		2027
		124 GRANADA STREET			
		 -,	Address		- Leen
		ROYAL PALM BEACH,	FL 33411	SERVICE TO THE	
			City/State and Zip Code		
		E-mail address: (to be used for future annual report notifi	eation)	F-
For further in	nformation co	oncerning this matter, please c	all:		
FRISNEL P	IERRE		786 442-6064		
	Name of	f Person	at () Area Code Daytime	Telephone Number	
Enclosed is a	check for th	ne following amount:			
■ \$25.00 F	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 enclo	
	iling Address gistration S		Street Address: Registration Sec	tion	
		orporations	Division of Corp	orations	
). Box 632 lahassee, F		The Centre of To 2415 N. Monroe	Hahassee Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FRISNEL TRUCKING LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited i	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on JANUARY 3, 2022	and assigned
Florida document number L18000196252		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi"	ity 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)		S 28
		27 27
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		69 P M
		ال بن الما
		771 Po
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	. •
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florid	
	City	Zip Code

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 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
AMBR	BENSON CHERISMA	124 GRANADA STREET	🗆 Add
		ROYAL PAŁM BEACH, FL 33411	■Remove
			Change
			□Add
			□Remove
			Change Change
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Filing Fee: \$25.00