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TALLAHASSEE, FLORIDA

2022 SEP 22 PH 2: 1:

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COVER LETTER

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Registration Section

Tallahassee, FL 32314

TO:

Divi	sion of Cor	porations		
čim irot.	Top Notch	Diesel Truck Service L.L.C.		
SUBJECT: .		Name of Lim	nited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Herbert W. Larson, Esq.		
		<u></u>	Name of Person	
		Larson & Larson, PA		
		-	Firm/Company	
		11199 69th Street North, L	Largo, FL 33773	
			Address	
		Largo, FL 33773		
			City/State and Zip Code	
		bill@larsonpatentlaw.com	(to be used for future annual report notification)	
For further in:	formation co	oncerning this matter, please co		
Herbert W. L			727 546-0660	
	Name of	Person	at () Area Code Daytime Telephone Number	
Enclosed is a	check for th	e following amount:		
■ \$25.00 Fi	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee. Certificate of State Certified Copy (additional copy is enc	
	ing Address		Street Address:	
-	istration S ision of C	orporations	Registration Section Division of Corporations	
	. Box 632	-	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Top Notch Diesel Truck Service L.L.C.		2022 ÂLL
(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our reco	rds.)
		22 22 SSE
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number L19000004294	1 2: STAT LORI	
This amendment is submitted to amend the following:		13 DA
A. If amending name, enter the new name of the limited liab	ility company here:	
TND Truck Service L.L.C.		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "Ll	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	10450 66th St N., Unit 5003	
	Pinellas Park, FL 33782	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>ente</u>	er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	ess
		Florida
	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>	Name	Address	Type of Action
			□Add
			Remove
			□Change
			□Remove
			□Change
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E. Effect	tive date, if other than the date of filing: (optional)	
(If an eff	tive date, if other than the date of filing: (optional) Tective 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 605.0	0207 (3
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Filing Fee: \$25.00