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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: RAR TYLICKING AND TVANSPORT LLC Name of Limited Lightlity Company
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:
* Trease return an correspondence contenting the state of
La-Sheriz R McCod
Park Trucking and Transport Use.
510156 Loth STRd AA 21057
DCDD, Ft 34174 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
12-Sheciz R. McCod at (353) 683-6159 Name of Person at (353) Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Signature S30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S25.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now approach (A Florida Limited Liability Company The Articles of Organization for this Limited Liability Company were filed on	and assigned
Florida document number L19000006591	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	here:
The new name must be distinguishable and contain the words "Limited Liability Company," the	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	29
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>
	1
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	3-
B. If amending the registered agent and/or registered office address	on our records, enter the name of the new
registered agent and/or the new registered office address here:	on our recording enter the finance of the tags
Name of New Registered Agent:	

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.

City

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>	<u>Name</u>		Address		Type of Action
AMBR	Richard	s, landoph =	П	5101 Swhoths	∏{d□ Add
Please	Change	from	A	pt 3107	Remove
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Filing Fee: \$25.00