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S. ROBERTS MAY 1 2 2023

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Name of United Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Antonio & Mortimer Name of Person
Firm/Company CC
3131 N 73rd Terrace
City/State and Zip Code
E-mail address: (to be used for future annualtrefort notification)
For further information concerning this matter, please call:
Name of Person
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{S30.00 Filing Fee & Certificate of Status}\$\Bigcup \text{S55.00 Filing Fee & Certified Copy tadditional copy is enclosed}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}\$\Bigcup \text{S60.00 Filing Fee, Certified Copy tadditional copy is enclosed}\$\Bigcup \text{S60.00 Filing Fee}\$\Bigcup S60.00 Filing

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

110

- 1-11 rumping		
(Name of the Limited Liability Co (A Florida Edmi	mpany as it now appears on ou ted Liability Company)	r records.)
The Articles of Organization for this Limited Liability Compa	any were filed on MAV	Ch Al, 1033 and assigned
Florida document number 11900018768		
Florida document number 11 1000 1000 1000 1000 1000 1000 1000		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
Am Trucking and Pur	maina,) LC	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		~1
Principal office address MUST BE A STREET ADDRESS	<u> </u>	773
Timepai affec duares, most bit horniget hobbleso		
	 	10
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)	 	?
		22
B. If amending the registered agent and/or registered offi	ce address on our records	, enter the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	et address
	City	, Florida Zip Code
	Citi	zap Coue

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	<u>Address</u>	Type of Action
			□Remove
			□Change
			□Add
	·		. Remove
	•	————————————————————————————————————	□Change
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			□Add
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			□Change
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			□Change

D. If amer	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe Note: I	re date, if other than the date of filing:
f the record ecord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	march 31 . 2023.
	Signature of a member or authorized representative of a member
	Typed or printed name of signee