

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000256811 3)))



H220002568113ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTAX USA INC. Account Number : 120000000254

Phone : (727)546-3335 Fax Number : (727)546-3365

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

F41	Address:			
	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ROBKE DRIFT & TRANSPORT LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

JUL 2 9 2022

ik. Brumb**i∌**y

H22000256811 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(Name of the Limited Linbility Company) as It now appears on our records. (A Florida Limited Linbility Company) The Articles of Organization for this Limited Liability Company were filed on	
Florida document number L19000135916 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ROAD GLIDER LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC. Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new reagent and/or the new registered office address here:	
A. If amending name, enter the new name of the limited liability company here: ROAD GLIDER LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC. Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new reagent and/or the new registered office address here:	cd
ROAD GLIDER LLC The new name must be distinguishable and contain the words "Limited Liability 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new reagent and/or the new registered office address here:	
The new name must be distinguishable and contain the words "Limited Liability 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new register and/or the new registered office address here:	
Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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:	
(Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent:	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent:	
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent:	
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent:	
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent:	
Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent:	
B. If amending the registered agent and/or registered office address on our records, enter the name of the new reagent and/or the new registered office address here: Name of New Registered Agent:	
Name of New Registered Agent:	eistered
	2
No. 10 to 100° A21 to	<u>;</u>
New Registered Office Address: Enter Florida street address 2007	<u> </u>
City , Florida, Florida	FILE
New Registered Agent's Signature, If changing Registered Agent:	FILED
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply v provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document 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.	FILED
	nd

If Changing Registered Agent, Signature of New Registered Agent

_____ Change

H220002568113

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>tlę</u>	<u>Name</u>	Address	Type of Act
			
			□Remove
			Change
			□Add
			©Remove
			Change
			□Add
			□Remove
		/	Change
			□∧dd
			CRemove
			Change
			©Add
			□Remove
			Change
_			ClAdd
			□Remove

H220002568113

		—
		_
		—
		_
		—
	<u>·</u>	
		_
ffective date, if other than the date of till	ine: (optional)	
an effective date is listed, the date must be specific a	ing: (optional) and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to	605.0
ote: It the date inserted in this block does no becament's effective date on the Department of	a meet the applicable statutory filing requirements, this date will not be f State's records.	iiste
record specifies a delayed effective date, but n	not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day:	after
is filed.	0. 2. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	
he 1 - 64		
aicd July 29th	<u>, 2012 </u>	
0 1	- was	

Typed or printed name of signee