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Certified Copies	_ Certificate	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT: BIC	5 CAR SALES Name of Lin	Hauler UC	<u>'</u>		:ر
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.		•	
Please return all correspondent	ondence concerning this matte	r to the following:			
	Georber 5	RITE WILL Name of Person			
	BIG CAR S	ALES + HualeR L			
	4100 Bear	LAKES CF 17pt 30	DZ FR	2021 FE8	-
	West Palm	Sexch, FL 3340° City/State and Zip Code	SECRETARY OF STATE  702 FEB 25 PH 12: 50  SECRETARY OF STATE  723 90  Stime Telephone Number  S60.00 Filing Fee,		
	COROLS SOLT E-mail address:	(to be used for futing annual report no	unification) in		آل ا
For further information c	oncerning this matter, please c		, ,	<b>7</b> 0	
GWRGEN S	eizeme	at ( <u><b>941</b></u> ) <u>467</u> Area Code Daytii	-2399	_	
Name o	f Person	Area Code Daytii	ne Telephone Number		
Enclosed is a check for th	ne following amount:				
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	S60.00 Filing Fe		

Mailing Address:

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

(additional copy is enclosed)

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

RECFIVED

Certificate of Status & Certified Copy (additional copy is enclosed)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BICCAR SALES (Name of the Limited I	Haule C jability Company a forida Limited Liabi	s it now appears on our lity Company)	r records.)	₽   FEE
The Articles of Organization for this Limited Liabi Florida document number <u>L1900169</u>		re filed on <u>06/2</u>	\$/2019 SEE	B 25 and assigned
This amendment is submitted to amend the following	าธิ:		FL	PH 12: 50
A. If amending name, enter the new name of the	<u>: limited liability</u>	company here:	•	
BIGEX LOGISTICS				
The new name must be distinguishable and contain the words	"Limited Liability C	ompany," the designatio	on "LLC" or the abbrevia	ntion "L.L.C."
Enter new principal offices address, if applicable	:		<u>.                                    </u>	
(Principal office address MUST BE A STREET A	DDRESS)			
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BO)</u>	_			
B. If amending the registered agent and/or regis agent and/or the new registered office address he	tered office addr e <u>re</u> :	ess on our records,	enter the name of t	he new registered
Name of New Registered Agent:	<u>_</u>			
New Registered Office Address:				
		Enter Florida street	address	<del></del>
_	<del>-</del>	<del></del>	Florida	
	•	Cuy	Ziţ	o 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
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(If an effec   <u>Note:</u>   If	we date, if other than the date of filing:	. to 605.0207 (, be listed as th
ne record ord is filed	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th dated.	y after the
Dated <u>(</u>	02/24/2021	
	Signature of a member or authorized representative of a member	