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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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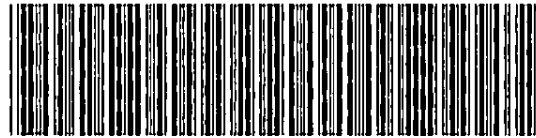
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

US
3/9/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: REGAL SERVICE DESIGNS LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PETER MARIONI

Name of Person

Firm/Company

5049 NE 12TH AVE

Address

FORT LAUDERDALE FLORIDA 33334

City/State and Zip Code

MUOGL 777 @ BELL SOUTH.NET

E-mail address: (to be used for future annual report notification)

or further information concerning this matter, please call:

PETER MARIONI

Name of Person

at (

754)

Area Code

246-6604

Daytime Telephone Number

enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

- REG. AGENT SIGN
- CHECK

SECRETARY OF STATE
TALLAHASSEE, FL

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

REGAL SERVICE DESIGNS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 7/24/2019 and assigned
Florida document number L 19000188649.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

REGAL TRANSPORTATION SERVICES INC

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)

7750 WEST MCNAB ROAD APT 310
TAMARAC, FLORIDA 33321

Enter new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX)

7750 WEST MCNAB ROAD APT 310
TAMARAC FLORIDA 33321

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:

PETER MARIONI

New Registered Office Address:

7750 WEST MCNAB ROAD APT 310

Enter Florida street address

TAMARAC

City

Florida

33321

Zip Code

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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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.

Peter Marioni

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>	<u>Address</u>	<u>Type of Action</u>
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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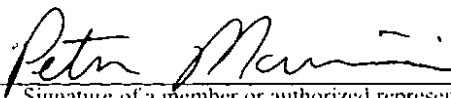
Effective date, if other than the date of filing: _____ (optional)

If an effective 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 605.0207 (3)(b)

g: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

and 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 document is filed.

1/20 . 2021



Signature of a member or authorized representative of a member

PETER MARION

Typed or printed name of signee