K19000195314

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SECRETARY OF STATE
TALLAHASSEE, FL

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COVER LETTER

TO: Registration S Division of Co							
Top Fuel	Auto Transport, LLC						
SUBJECT:	Name of Lin	nited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please return all correspondent	ondence concerning this matter	to the following:					
	Lazaro J. Farias and Rapl	nael S. Lynne					
	<u> </u>	Name of Person					
	Top Fuel Auto Transport	LLC					
		Firm/Company	· · · · · · · · · · · · · · · · · · ·				
	8200 SW 96 Ct.		2021 SEC TA				
		Address					
	Miami, FL. 33173		JUL 26 PI				
	TopFuelAutoTransportFL0		4 2: E. F.				
	E-mail address: (to be used for future annual report not	ification)				
	concerning this matter, please c						
Raphael S. Lynne or La	azaro J. Farias	305 903-0324					
Name o	of Person	Area Code Daytin	ne Telephone Number				
Enclosed is a check for t	he following amount:						
☐ \$25.00 Filing Fee	■ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,				
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)				
Mailing Addre		Street Address:					
Registration Section		Registration Se					
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Top Fuel Auto Transport LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records Liability Company)	5.)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L19000195314</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Top Fuel Freight and Logistics LLC		
The new name must be distinguishable and contain the words "Limited Liab Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	oility Company," the designation "LLC"	or the Abrevia Property of STATE OF STATE
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 regist
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	y
		oridaZio Code
	City	гір с оае

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
			□Add
			□Remove
			□Change
			□Add
			SE CREE CHARGE
<u></u>	<u></u>		SECRETARY OF STATE. TALLAHASSEE, FL
			☐ Remove
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Tective date, if other than the date of filing: an effective date is listed, the date must be specific and ca	anne ha mine to	data of filing or p	(optional)	Durenant t	a 605 020
ote: If the date inserted in this block does not mee	et the applicabl	le statutory filii	ig requirement	s, this date v	vill not b	e listed a
ocument's effective date on the Department of Stat	le's records.					
record specifies a delayed effective date, but not an	affective time	s at 12:01 a.m.	on the earlier of	of the The	90th day	after the
is filed.	refrective time	., at 12.01 a.m.	on the carrier	71. (0) THE	zour day	arter till
July 20th	2021	_				
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Signature of a mea	mber or authoriz	zea representativ	or a memoer			