L19000274924

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Daguerant Number) |
| (Document Number) |
| ertified Copies Certificates of Status |
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| TO IL | Express Hai | aling Services, LLC | • | |
| UBJE | | | | |
| 'he enc | losed Articles of . | Amendment and fec(s) are sub | mitted for filing. | |
| lease r | eturn all correspo | ndence concerning this matter | to the following: | |
| | | John Griffing | | |
| | | | Name of Person | |
| | | INTELESOFT, INC. | | |
| | | | Firm Company | |
| | | 3001 Aloma Ave. | | |
| | | | Address | |
| | | Winter Park, FL 32792-37. | 52 | |
| | | | City/State and Zip Code | |
| | | info(@intelesoft.com E-mail address: (| to be used for future annual report not | ification) |
| or furt | her information co | oncerning this matter, please co | • | |
| lohn Gr | iiling | | 407 710-5400 x1 | |
| | Name o | f Person | at {}} Area Code Daytin | ne Telephone Number |
| Enclose | d is a check for th | ne following amount: | | |
| □ S25 | .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 S Division of C P.O. Box 632 Tallahassee, I | Section orporations 7 | Street Address: Registration Se Division of Co The Centre of 1 2415 N. Monro Tallahassee, FI | rporations Fallahassee oe Street, Suite 810 |

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

Express Hauling Services, 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 Compan | y were filed on November 4, 2019 | and assign නි |
|---|--|---|
| lorida document number L19000274924 | | . 4 |
| his amendment is submitted to amend the following: | | |
| a. If amending name, enter the new name of the limited lia | bility company here: | |
| he new name must be distinguishable and contain the words "Limited Lia | oility Company," the designation "LLC" or the | abbreviation "L.L.C." |
| Inter new principal offices address, if applicable: | | <u>.</u> |
| Principal office address MUST BE A STREET ADDRESS) | | |
| Inter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>) | | |
| 3. If amending the registered agent and/or registered office gent and/or the new registered office address here: Name of New Registered Agent: | address on our records, enter the na | me of the new registered |
| New Registered Office Address: | | |
| | Emer Florida street address | |
| | Florida _ | Zip Code |
| | City | Zip Code |
| iew Registered Agent's Signature, if changing Registered Agen | | |
| hereby accept the appointment as registered agent and agerovisions of all statutes relative to the proper and complete cept the obligations of my position as registered agent as seing filed to merely reflect a change in the registered office ompany has been notified in writing of this change. | te performance of my duties, and I an s provided for in Chapter 605, F.S. O | i familiar with and r, if this document is |
| 1f Ch | anging Registered Agent, Signature of New 1 | Registered Agent |

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

IGR = Manager MBR = Authorized Member

| <u>itle</u> | Name | <u>Address</u> | Type of Action |
|-------------|------------------|-----------------------------|----------------|
| 1GR | Ken F. Hannigan | 272 Sheppard St. | □ Add |
| | | Altamonte Springs, FL 32701 | ■Remove |
| | | | □ Change |
| 1GR | Coby P. Hannigan | 272 Sheppard St. | ■Add |
| | | Altamonte Springs, FL 32701 | ⊡Remove |
| | | | □Change |
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| ctive date, if other than the da | te of filing: | | | (optional) | |
| ective date, if other than the da effective date is listed, the date must be e: If the date inserted in this block | specific and cannot be does not meet the ar | prior to date of filin indicable statutory | g or more than 90 da c filing requireme | nys after filing.) Pursu nts. this date will no | am to 605,020 of be listed a |
| ument's effective date on the Depa | rtment of State's reco | ords. | , <u>e</u> . • • • · · · · · · · | | |
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| ord specifies a delayed effective di filed. | ite, but not an effecti | ve time, at 12:01 | a.m. on the earlie | r of: (b) The 90th | day after the |
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| September 21 | 2020 | | | | |
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