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| (Requestor's Name) | |
|---|--------|
| (Address) | |
| (Address) | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT | MAIL |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Sta | atus |
| Special Instructions to Filing Officer: | |
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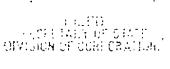
Registration Section

TO:

| Division of Cor | porations | | |
|------------------------------|--|---|--|
| TIL TRUCK | K LLC | | |
| SUBJECT: | Name of Limi | ted Liability Company | - |
| The enclosed Articles of | Amendment and fee(s) are sub | nitted for filing. | |
| Please return all correspo | ndence concerning this matter | to the following: | |
| | | | |
| | Rolando Martinez | | |
| | | Name of Person | |
| | Royal Carrier Service, LLC | C. | |
| | | Firm/Company | |
| | 7392 NW 35th Ter Suite 3 | 05 | |
| | | Address | |
| | Miami, FL. 33122 | | |
| | f. () 1ii | City/State and Zip Code | |
| | safety@royalcarrierservice. E-mail address: (| to be used for future annual report not | (fication) |
| For further information c | oncerning this matter, please ca | all: | |
| Rolando Martinez | | 305 222-7118 | |
| Name o | f Person | at () Area Code Daytin | ne Telephone Number |
| Enclosed is a check for the | ha fallawing amount: | | |
| | - | These on titles the P. | ☐ \$60.00 Filing Fee, |
| ■ \$25.00 Filing Fee | S30.00 Filing Fee & Certificate of Status | \$\sum \\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | | |
| Mailing Address Registration | | Street Address: Registration Se | ection |
| Division of C | | Division of Co | |
| P.O. Box 632 | 27 | The Centre of | Γallahassee |
| Tallahassee, | FL 32314 | 2415 N. Monro | e Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION DEVISION OF CORE CRACELIAL **OF**



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| TIL TRUCK, LLC. | |
|--|---|
| (Name of the Limited Liability Compa (A Florida Limited l | any as it now appears on our records.) Liability Company) |
| The Articles of Organization for this Limited Liability Company Florida document number L19000287984 | were filed on 03/05/2020 and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liab | ility company here: |
| The new name must be distinguishable and contain the words "Limited Liabi | lity Company," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 8319 62nd Court E |
| (Principal office address MUST BE A STREET ADDRESS) | Apt. 2202 |
| | Sarasota, FL. 34243 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 8319 62nd Court E |
| | Apt. 2202 |
| | Sarasota, FL. 34243 |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: | |
| | Enter Florida street address |
| | Florida |
| | CHV ZH COW |

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: FILED CLOSE TARL OF STATE OVERSION OF CORE CHAFTERS

MGR = Manager

AMBR = Authorized Member

| ANIBIC 1 | their in the state of the state | 21 APR -2 AM 9:58 | |
|--------------|--|-------------------|----------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| mending any other information, enter change(s) here: (. | |
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| 01/26/2021 | (antique) |
| ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date. If the date inserted in this block does not meet the applicable ument's effective date on the Department of State's records. | (optional) late of filing or more than 90 days after filing.) Pursuant to 605.02 e statutory filing requirements, this date will not be listed |
| cord specifies a delayed effective date, but not an effective time, s filed. | at 12:01 a.m. on the earlier of: (b) The 90th day after the |
| ed January 26 . 2021 | |
| tuen t | |
| / 1/1/4/2/7/ | |
| Signature of a member or authorize | ed representative of a member |

Filing Fee: \$25.00