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FILED 2022 JUN -7 PM 1: 0 SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporation	ons		
SUBJECT: Gre	enes Ai	10 Detai	ling
The enclosed Articles of Amend	lment and fee(s) are subm	nitted for filing.	
Please return all correspondence	concerning this matter to	the following:	
	0	Name of Person	ene
	Gree	Ene's Aut	o Detailing
	BI Duval	Station Rd.	107-260
	Goattruck E-mail address: (to	FL 32218 City/State and Zip Code Cing VSA & Code be used for future annual repo	mail.com
For further information concerni	ng this matter, please call	:	
Name of Person	reene	at (251) 1	53-1239 Daytime Telephone Number
Enclosed is a check for the follow	wing amount:		
	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 tadditional 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

ARTICLES OF A	
T(مسته المستوالية المستو
ARTICLES OF O	- pu 1. 01
(Name of the Limited Liability Companion (A Florida Limited L.	O Detail ISECRETARY OF STATE IN ASSET, FLIGHT WAS IT NOW ADDRAYS ON OUR records.)
The Articles of Organization for this Limited Liability Company value of Organization for this Limited Liability Company value $12000014+29$.	vere filed on Canvary 13, 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabile. GOAT Truckin The new name must be distinguishable and contain the words "Limited Liability".	g VSA LLC
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	3156 Scenic Oaks Or. Jacksonville FL, 32226
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	731 Duval Station Rd. 107-260 Jackson Ville FL. 32218
3. If amending the registered agent and/or registered office adequated and/or the new registered office address here:	idress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address

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.

City

Florida

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
			DAdd
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	New email-Goat trucking U3a algmail.com
_	Phone number-251-753-1239
	EIN-87-4310309
_	
_	
_	
(If an effect <u>Note:</u> If	e date, if other than the date of filing:
If the record s	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 l.
Dated	6/3/2022. Divitz Dreene-

Diale Casons