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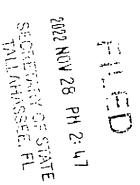
(Requestor's Name)
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(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration Division of C			•
Commer SUBJECT:	cial Vehicle Investigations LLC	•	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sui	bmitted for filing.	
Please return all corres	pondence concerning this matter	r to the following:	
	Joseph Kemper		
	***	Name of Person	
	New Business Filing		
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	8170 Washington Villiage	: Dr	
		Address	
	Dayton OH 45458		
		City/State and Zip Code	
	orders@newbusinessfiling.	*	
		to be used for future annual report noti	fication)
For further information	concerning this matter, please c	all:	
Joseph Kemper		888 7016450 at ()	
Name	of Person		e 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 Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Commercial venicle investigations LLC		
(<u>Name of the Limited Li</u> (A Fl	ability Company as it now appears on our reco orida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Florida document number 1.20000035400	ty Company were filed on 1/29/2020	and assigned
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
CVILLC		
he new name must be distinguishable and contain the words	Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AL	DDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX	9	
	_	
3. If amending the registered agent and/or regist agent and/or the new registered office address he		er the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	lress
<u>_</u>	;	Florida
	City	Zip Code

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 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>	Name	<u>Address</u>	Type of Action
-			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			SECO Champe
			A COAGO
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			□Change

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	ate must be specific and	d cannot be prior to	date of filing or more to the statutory filing re	(optional han 90 days after filing quirements, this date	z.) Pursuant to 605.0207
fective date, if other that an effective date is listed, the dote: If the date inserted in ocument's effective date or	this block does not not the Department of S	meet the applicab State's records.			
an effective date is listed, the doctor. If the date inserted in	the Department of S	State's records.		he earlier of: (b) T	he 90th day after the
an effective date is listed, the dote: If the date inserted in ocument's effective date or record specifies a delayed easi filed. November 22	the Department of S	State's records.		he earlier of: (b) T	he 90th day after the
an effective date is listed, the dote: If the date inserted in ocument's effective date or record specifies a delayed easi filed.	ffective date, but not	State's records. t an effective time 2022		/ D ~	he 90th day after the