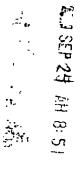
	(Requestor's Name)
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	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
+ 	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:

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C. GOLDEN SEP 2 5 2020

COVER LETTER

TO:	Registration S Division of Co			
SUBJE		TRUCKING LLC		
NOBIL		Name of Lin	nited Liability Company	
The end	closed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please i	eturn all corresp	ondence concerning this matter	to the following:	
		MARIA FERNANDA FE	RSACA	
			Name of Person	
		MFF SOLUTIONS LLC		
			Firm/Company	
		142 NW 37TH STREET		
			Address	<u> </u>
		MIAMI, FL 33127		
			City/State and Zip Code	
		ADMIN@MFFASSOCIAT		
For furt	her information	e-man address: t	to be used for future annual report not all:	ilication)
	A FERNANDA I	FERSACA	786 842-0071	
	Name o	of Person	at () Area Code Daytin	ne Telephone Number
Enclose	d is a check for t	he following amount:		
≅ \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy) (additional copy)

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

SEP 24 PH 12: 12

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2078 25 N/H: 12

OMATER TRUCKING LLC	ETATO ZE ACHETZ
(Name of the Limited Liability Company as it now appears on (A Florida Limited Liability Company)	nur records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{\text{FEBRI}}{\text{L}_{2}0000055070}$.	ARY 18, 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	995 to 20
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our recor agent and/or the new registered office address here:	ls, enter the name of the new registere
Name of New Registered Agent:	··
New Registered Office Address:	
Enter Florida s	reet 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

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>	<u>Name</u>	Address	Type of Action
MGR	WILFREDO A. TERAN	5610 NW 114 PL UNIT 206	□Add
		MIAMI, FL 33178	≅Remove
			□Change
			□Add
			Remove
			□Change
			🗀 Add
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			☐ Change
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rote: if the	ate, if other t date is listed, the date inserted effective date	in this ploc	k does not	meet the :	applicable	late of tiling e-statutory	or more the filing requ	(o m 90 days a irements,	ptional) ofer filing.) this date	Pursuant to (will not be 1	605,0207 (isted as t
record spec d is filed.	cifies a delayed	d effective o	late, but no	ot an effec	itive time.	, at 12;01 :	a,m, on the	earlier of	(b) The	: 90th day a	iter the
SEPT	TEMBER 23			2020	>-/						
				\ \ \	メンドレジセス	7)					
		Si	gnature of a	member o	althoriza) M represent	tative of a n	icmber			

Filing Fee: \$25.00