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## **COVER LETTER**

. : :

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO: Registration Section Division of Corporation		·	<b>1:</b>
SUBJECT: GIYS	Trucking with grame of Limited	the Boys LLC.	
The enclosed Articles of Art	nendment and fee(s) are submitt	ed for filing.	
Please return all corresponde	ence concerning this matter to the	he following:	
	ARVIE	C DEAN III Name of Person	
	Girls Trucking	) with the Boys LLC Firm/Company	<del>·</del>
	LID NE	Dth St.	
	<u>GAINSVILLE</u>	FL 32601	
-	girls truckingw 1:-mail address: do bo	oth the borne Vance (mr e used for future annual report notification)	<u>) .                                   </u>
For further information conc	eerning this matter, please call:		
Arvie C Name of Po	Dean III	at ( <u>352)</u> 318 7777 Area Code Daytime Telepho	one Number
Enclosed is a check for the f	ollowing amount:		
S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee &  Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Sec	ction	Street Address: Registration Section	
Division of Corp		Division of Corporation	
P.O. Roy 6327		The Lentre of Tallahas	2000

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our r Liability Company)	ecords.)	<del></del>
The Articles of Organization for this Limited Liability Company	were filed on		_ and assigned
Florida document number			
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 abbre	
Enter new principal offices address, if applicable:			20/
(Principal office address MUST BE A STREET ADDRESS)		<u>.                                    </u>	<u> </u>
		<u> </u>	5 -
			3 1
Enter new mailing address, if applicable:		; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		5.3	9
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>e</u>	enter the name o	f the new regi
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street a	addrase	<del></del>
	Enter Florida Sireet t		
<del></del>	City	_, Florida	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>	<u>Name</u>	Address	Type of Action
AMBR	ARVIE C. DEAN III	110 NE 10th St	ÞAdd
		Gainsville, FL 32601	□Remove
			□Change
MGR	PATRICIA MARQUEZ	777 E. Quartz PMB19833	□Add
		Jean, NV 89019	Remove
			Change
			. □Add
			Remove
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		<del></del>	□Remove
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