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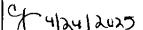
(Requ	uestor's Name)	
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COVER LETTER

TO:

Tallahassee, FL 32314

	Registration Sec Division of Corp			
· cud iec		N & ROBINSON COURIER A	ND EXPEDITED DELIVERY SE	RVICE, LLC
SUBJEC	.l:	Name of Lim	ited Liability Company	
The encl	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter		
		TOMIKA ROBINSON		
			Name of Person	
			Firm/Company	
		1716 WILD DUNES CIRC	CLE	
			Address	,
		ORANGE PARK/FL 3206	5	
		CJROBINSON0776@AOL	City/State and Zip Code .COM to be used for future annual report noti	Figuriar)
For furth	er information co	oncerning this matter, please ca		iteatony
TOMIKA ROBINSON Name of Person		980 319-6203		
		f Person	at () Area Code Daytim	e Telephone Number
Enclosed	is a check for th	ne 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 Addres Registration S		<u>Street Address:</u> Registration Se	ction
Division of Corporations		Division of Corporations The Centre of Tallahassee		
	P.O. Box 632	1	ine Centre of i	ananassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROBINSON & ROBINSON COURIER AND EXPEDITED DELIVERY SERVICE, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\underline{}^{05/15/2020}$ and assigned Florida document number 1.20000131758 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ROBINSON & ROBINSON LOGISTICS, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (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 records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida _ City

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:

MGR =	Manager
AMBR =	Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Change
			□Remove
			☐Change
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ective date, if other than	the date of tiling:	5/2025		_ (optional)	405 0 5 05
n effective date is listed, the date ite: If the date inserted in this	must be specific and cannot s block does not meet the	be prior to date of his applicable statute	ling or more than 90 d ory filing requireme	lays after filing.) Pursuant ents, this date will not b	to 605,0207 be listed as
cument's effective date on the	e Department of State's	ecords.	, .		
ecord specifies a delayed effe	ctive date, but not an effe	ective time, at 12:0	I a.m. on the earlie	er of: (b) The 90th da	y after the
is filed.					
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ted OZIOS		·			
$\mathcal{L}(\mathcal{A})$	B21110	\wedge $/$			
TX	Signature of a member	or authorized repre	sentative of a membe	r	
TOMIKA ROBINSO					
	Typed	or printed name of	signee		

Filing Fee: \$25.00