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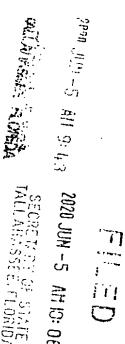
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Corporations	
SUBJECT: Red Wolf &	SOLOSS LLC Vd Liability Company
The enclosed Articles of Amendment and fee(s) are sub-	
Machio 3	Name of Person
Red Wol	F Express LLC Firm/Company
143 HAZE	Lwood River Rd
•	City/State and Zip Code 3 e 4 A H & COM The used for Auture annual report notification)
For further information concerning this matter, please cal	,
Marchio J Wolf Jr Name of Person	at (386) 481 8479 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25,00 Filing Fee	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Red Wolf Express	LLC	
(Name of the Limited Jiability Compa (A Florida Limited L	LLC ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 200014427</u> 32	were filed on <u>5/24/26</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbr	eviation "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 acagent and/or the new registered office address here: Name of New Registered Agent:	ddress on our records, enter the name o	SECRICIA SECULOR OF THE PRINTED OF
New Registered Office Address:		<u> </u>
	Enter Florula street address	
	, Florida	Zin Code
	—···	in cone

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

Title	<u>Name</u>	Address	Type of Action
MGR	Machin J WOLF Jr	143 Hazelwood River	_SAdd
		143 Hazelwood River Edgewater 72 32141	©Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
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cord specifies a stiled.	delayed effective da	te, but not a	n effective tin	ne, at 12:01 a.r	n. on the earlier	of: (b) The 9	0th day after th
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Filing Fee: \$25.00