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| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: Registration Section Division of Corporations | |
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| SUBJECT: <u>Jeliahn Cattle LLC</u> Name of Limited Liability Company | |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| Fabio A Almanzar Name of Person | |
| Jeliahn Cattle LLC | 202 |
| Firm/Company | 33 OC |
| 409 W Dees Rd. | - |
| Address | 7 P) |
| Lakeland FL 33810 | 2023 OCT 7 PH 2: 40 |
| City/State and Zip Code Parodidenise Pyahoo Com E-mail address: (to be used for future annual report notification) | 0 |
| | |
| For further information concerning this matter, please call: | |
| Denise Parodi Name of Person at (321) Area Code Daytime Telephone Number | |
| Enclosed is a check for the following amount: | |
| S25.00 Filing Fee S25.00 Filing Fee S255.00 Filing Fee Fee S255.00 Filing Fee Fee S255.00 Filing Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe | |
| Mailing Address: Registration Section Street Address: Registration Section | |

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

| Jeliahn Cattle Ll | C and a second a seco |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (A Florida Limi | mpany as it now appears on our records.) ted Liability Company) |
| The Articles of Organization for this Limited Liability Comp. Florida document number $\underline{L2000191995}$. | any were filed on 07-09-2020 and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited by A. A. A. L. C. J. A. A. The new name must be distinguishable and contain the words "Limited L. | Transportation LLC |
| Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | 1409 W DEES Rd 1 AKELAND FL 33810 |
| | |
| Enter new mailing address, if applicable: | 23 OCT |
| (Mailing address MAY BE A POST OFFICE BOX) | |
| B. If amending the registered agent and/or registered offi agent and/or the new registered office address here: | ice address on our records, enter the name of the new registered |
| Name of New Registered Agent: | |
| New Registered Office Address: | Enter Florida street address |
| | , Florida |
| | City Zip Code |
| New Registered Agent's Signature, if changing Registered Ag | ent: |

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 | Address | Type of Action |
|--------------|------------------|-----------------------|----------------------|
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Filing Fee: \$25.00