

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet**L20000208990****Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : REZLEGAL, LLC
Account Number : I20140000033
Phone : (904) 685-9321
Fax Number : (904) 567-1066****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.******Email Address:** myron@ibcces.org**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
2X2 TRANSPORTATION, LLC**

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COVER LETTER

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**TO: Registration Section
Division of Corporations**

SUBJECT: 2x2 Transportation, LLC

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:

Tanya G. Foreman, Esq.

Name of Person

RezLegal, LLC

Firm/Company

816 A1A North, Suite 204

Address

Ponte Vedra Beach, Florida 32082

City/State and Zip Code

myron@ibcces.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tanya G. Foreman, Esq.

904

638-1164

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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2x2 Transportation, 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 07/23/2020 and assigned
Florida document number 120000208990.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

Myron W. Pincomb

New Registered Office Address:

542201 Lem Turner Road

Enter Florida street address

Callahan

City

Florida 32011

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.

DocuSigned by:

Myron W. Pincomb

007A7D83/C50480

If Changing Registered Agent, Signature of New Registered Agent

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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>	<u>Address</u>	<u>Type of Action</u>
MGR	Myron W. Pincomb	542201 Lem Turner Road	<input checked="" type="checkbox"/> Add
		Callahan, FL 32011	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Myron Pincomb	24711 Harbour View Dr	<input type="checkbox"/> Add
		Ponte Vedra, FL 32082	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Article V of the Articles of Organization shall be replaced with the following:

The Company will be managed by its sole manager in accordance with and subject to the requirements of the Act

and Operating Agreement of the Company. The name and street address of the sole manager of the Company is:

Name: Myron W. Pincomb

Address: 542201 Lem Turner Road, Callahan, FL 32011

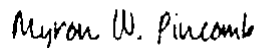
E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated February 6, 2023

DocuSigned by:

 007A70B37C504B0

Signature of a member or authorized representative of a member

Myron W. Pincomb

Typed or printed name of signer