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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 38A Trucking 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:	
Anthony Ruffin	_
SSA Trucking LLC Firm/Company	_
1919 Estivul St Address	_
FORTWALTEN BLACK FC. 32547 City/State and Zip Code	_
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Anthony Bullin at (950) 960 - 59415 Name of Person at (950) Daytime Telephone Number	er
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certific	ate of Status &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SSA Trucki	nany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compan	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	ability company here:
A1 Fleet 1 CA STICS LLC The new name must be distinguishable and contain the words "Limited Lia Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	300 71 6691 OF Jancio + C.
Enter new mailing address, if applicable:	2523
(Mailing address MAY BE A POST OFFICE BOX)	- VO
B. If amending the registered agent and/or registered office and/or the new registered office address here:	ce address on our records, enter the name of the new registered
Name of New Registered Agent: Anho	ony Russin
New Registered Office Address:	E St. VOL 5t. Enter Florida street address
Fortura	1401 Beach, Florida 32547 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

Page 1 of 3

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

Type of Action Address Title Name. Anthony Rullin 1919 Estival St FWB FI DAW 32547 MGR Starey Ruffin 1919 Estival St FWB FI, DANG 32547 ____ □Add ______ Remove _____ □Change Remove _____ □Change □Add Remove _____ □Change □ Remove

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Note	tive date, if other than the date of filing: (optional) (fective 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a nent's effective date on the Department of State's records.
ie re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier to 20th day after the record is filed.
Th	
The	November 9, 2023.
The	
The	November 9, 2023 Signature of a member or authorized representative of a member