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COVER LETTER

TO: Registration Sec Division of Corp		r	
SUBJECT:	NOTTOG ZNAT	LLC.	
	Name of Lim	Name of Limited Liability Company and fee(s) are submitted for filing. The submitted for filing. Th	
The analogue Articles of 2	Amondment and finder are sub-	nitted for filing	
rease return an correspon	ndence concerning this matter t	o are following.	
	Christopher	(reary)	
	`	Name of Person \	
		Firm/Company	
	EUR KINGFISHA	Address	
	E-mail address: (1	o be used for future annual report i	notification)
for further information co	ncerning this matter, please ca	ili:	
Christayher	Creinny_	ar (<u>407</u>) 350	2009
Name of	Person	Area Code Day	time Telephone Number
inclosed 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 Se		Street Address Registration	
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Name of Name o	Person Solution Status English of Status	at (407) 350 - Area Code Day Day S55,00 Filing Fee & Certified Copy (additional copy is enclosed) Street Address Registration	ime Telephone Number S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

P.O. Box 6327

Tallahassee, FL 32314

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

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

CHC REVERDACE COMMINI IIC

CHC BEVERAGE COMPA	NY LLC 7.750 13 110 15 5 ny as it now appears on our records.) Liability Company)
(Name of the Limited Liability Compa- (A Florida Limited L	as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on $\frac{09/99/2020}{}$ 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:
COC TRANSPORTATION HC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	548 KINGEISHER DRIVE
(Principal office address MUST BE A STREET ADDRESS)	E48 KINGEISHER DAVE KISSIMMEE, FL 34759
Enter new mailing address, if applicable:	548 Kingfisher Drive
(Mailing address MAY BE A POST OFFICE BOX)	KISSIMMER, FL 34759
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida, Zip Code
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete	• • •

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>	<u>Name</u>	Address 2 23 0 13	Type of Action
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Effective date, if other the an effective date is listed, the Note: If the date inserted document's effective date	in this block does	not meet the ap	plicable statuto	ng or more than 90 ry filing requiren	(optional) days after filing.) P nents, this date wi	ursuant to 605,0207 Il not be listed as
e record specifies a delayed rd is filed.	l effective date, bu	n not an effecti	ve time, at 12:0	I a.m. on the earl	lier of: (b) The S	Oth day after the
Dated		·	·			