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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

| Division of Corp | porations | | |
|----------------------------|--|---|--|
| CHRISCE. | | USA IIC | |
| SUBJECT: | Name of Lim | ited Liability Company | |
| | | | |
| The enclosed Articles of | Amendment and fee(s) are sub- | mitted for filing. | |
| Please return all correspo | ndence concerning this matter | to the following: | |
| | An L. | a Cook e | |
| | | Name of Person | · |
| | Diese | Firm/Company | |
| | | Bruce Hunt Roa | |
| | | Mulicoo | |
| | Clerment | FL 34715 City/State and Zip Code | · |
| | | City/state and Zip Code | |
| | E-mail address: () | to be used for future annual report not | ification) |
| For further information co | oncerning this matter, please ca | ali: | |
| Ashton Cooke | | 352 531-5994 at () | |
| Name of | Person | Area Code Daytin | ne Telephone Number |
| Enclosed is a check for th | e 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 | | Street Address: | |
| Registration S | | Registration Se | |
| Division of Corporations | | Division of Corporations The Centre of Tallahassee | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Diesel Driven USA LLC | |
|--|--|
| (Name of the Limited Liability Company (A Florida Limited Liab | as it now appears on our records.) oility Company) |
| The Articles of Organization for this Limited Liability Company we | ere filed on 9/24/2020 and assigned |
| lorida document number L20000302670 | |
| his amendment is submitted to amend the following: | |
| . If amending name, enter the new name of the limited liabilit | y company here: |
| he new name must be distinguishable and contain the words "Limited Liability | Company," the designation "LLC" or the abbreviation "L.L.C." |
| Inter new principal offices address, if applicable: | <u> </u> |
| Principal office address MUST BE A STREET ADDRESS) | |
| | <u>∞ !</u> |
| | in the second se |
| nter new mailing address, if applicable: | <u></u> |
| Mailing address MAY BE A POST OFFICE BOX) | 7. 2 |
| <u>-</u> | |
| If amending the registered agent and/or registered office adegent and/or the new registered office address here: | dress on our records, enter the name of the new regis |
| Name of New Registered Agent: | |
| New Registered Office Address: | Enter Florida street address |
| | |
| | |

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 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 | Type of Action |
|--------------|---------------|-----------------------|----------------|
| AMBR | Falyn B Cooke | 12007 Bruce Hunt Road | □Add |
| | | Clermont, FL 34715 | ■Remove |
| | | | □Change |
| | | | □Add |
| | | | □ Remove |
| | | | □ Change |
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| Effective date, if other than the date of filing: ((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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. 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 rord is filed. Dated ORYZN/2023 2023 Signature of a member or authorized representative of a member | | | | · · · · · · · · · · · · · · · · · · · |
|---|--|--|------------------------------------|---|
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| | 08/28/2023 Dated | 2023 | | |
| Signature of a member or authorized representative of a member | | | _ | |
| Signature of a member or authorized representative of a member | | are K Cham | ~ | |
| | | Signature of a member or auth | orized representative of a member | |
| | | bebra K Ebner Typed or print | | |

Filing Fee: \$25.00