

L20000328414

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

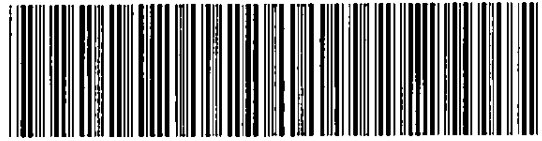
(Business Entity Name)

(Document Number)

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FILED
2024 DEC 20 PM 2:51
TALLAHASSEE, FLORIDA

RECEIVED
2024 DEC 20 PM 3:14
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 12/20/2024

PRIORITY Regular Approval

OUR REF.# (Order ID#) 1333799

ORDER ENTITY
TDC TRAILER LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

TDC TRAILER LLC (FL)

File the attached amendment

NOTES:

\$25.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be the initials "MM" or similar, written in a cursive style.

Please bill us for your services and be sure to include our reference number on the invoice and counter package if applicable. For UCC orders, please include the thru date on the results.

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

TDC Trailer LLC

2024 DEC 20 PM 2: 52

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 10/16/2020 and assigned
Florida document number L20000328414.

This amendment is submitted to amend the following:

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

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:

40900 Woodward Ave, Ste. 200

(Principal office address MUST BE A STREET ADDRESS)

Bloomfield Hills, MI 48304

Enter new mailing address, if applicable:

40900 Woodward Ave, Ste. 200

(Mailing address MAY BE A POST OFFICE BOX)

Bloomfield Hills, MI 48304

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:

C T Corporation System

New Registered Office Address:

1200 South Pine Island Road

Enter Florida street address

Plantation

City

Florida

33324

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.

Signed by:

Patrick Corden

310263C/DF8E475

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	TDC Trailer Acquisition, LLC	40900 Woodward Ave, Ste. 200	<input type="checkbox"/> Add
		Bloomfield Hills, MI 48304	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
President	Patrick Corden	40900 Woodward Ave, Ste. 200	<input checked="" type="checkbox"/> Add
		Bloomfield Hills, MI 48304	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	Luke Plumpton	40900 Woodward Ave, Ste. 200	<input checked="" type="checkbox"/> Add
		Bloomfield Hills, MI 48304	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Owner	Sheri A Sodomire	2124 Turning Hickory Ct	<input type="checkbox"/> Add
		Orlando, FL 32835	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Owner	Vlastmir Todorovic	480 Wexord Rd	<input type="checkbox"/> Add
		Valparaiso, IN 46385	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
CFO	Candis Craven	5300 S 108th St.	<input type="checkbox"/> Add
		Ste 15 #163	<input checked="" type="checkbox"/> Remove
		Hales Corners, WI 53130	<input type="checkbox"/> Change

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

Multiple horizontal lines for amending information.

FILED
2024 DEC 20 PM 2:52
TALLAHASSEE, FLORIDA

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 December 20, 2024

Signed by: Patrick Corden
310263C7DF6E475

Signature of a member or authorized representative of a member

Patrick Corden

Typed or printed name of signee