| (Requestor's Name)                     |             |
|--|-------------|
| (Address)                              |             |
| (Address)                              |             |
| (City/State/Zip/Phon                   | ne #)       |
| PICK-UP WAIT                           | MAIL        |
| (Business Entity Na                    | me)         |
| (Document Number                       | )           |
| Certified Copies Certificate           | s of Status |
| Special Instructions to Filing Officer |             |
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DIVISTA COMPOSE PLORIDA TALLAHASSEEL PLORIDA

Y SULKEP NOV 0 9 2020

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

| ACCOUNT NO. : I2000000195   |  |  |  |  |  |
|---|--|--|--|--|--|
| REFERENCE : 499268 4300043  |  |  |  |  |  |
| AUTHORIZATION: Symbolic man   |  |  |  |  |  |
| COST LIMIT : \$ 25.00   |  |  |  |  |  |
| ORDER DATE : November 4, 2020                                       |  |  |  |  |  |
| ORDER TIME : 10:34 AM   |  |  |  |  |  |
| ORDER NO. : 499268-020  |  |  |  |  |  |
| CUSTOMER NO: 4300043  |  |  |  |  |  |
|   |  |  |  |  |  |
| DOMESTIC AMENDMENT FILING   |  |  |  |  |  |
| NAME: HAYDEN SUMMIT LEASING LLC                                     |  |  |  |  |  |
| EFFECTIVE DATE:   |  |  |  |  |  |
| XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION         |  |  |  |  |  |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:                     |  |  |  |  |  |
| CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING |  |  |  |  |  |

EXAMINER'S INITIALS:

CONTACT PERSON: Amanda Robinson -- EXT# 62968

## ARTICLES OF AMENDMENT · **TO** ARTICLES OF ORGANIZATION **OF**

|   | YDEN SUMMIT LEASING LLC   |                                       |             |
|---|---|---------------------------------------|-------------|
| ( <u>Name of the Limited</u><br>(A                        | Liability Company as it now appears on our records.) Florida Limited Liability Company) |                                       |             |
| The Articles of Organization for this Limited Liab        | oility Company were filed on OCTOBER 26, 2020   | and assign                            | ad          |
| Florida document number L20000333707                      |   | and assign                            | icu -       |
| This amendment is submitted to amend the follow           | ving:   |                                       |             |
| A. If amending name, enter the new name of the            | he limited liability company here:  |                                       |             |
| HAYDEN SUMMIT TRUCKING LLC                                |   |                                       |             |
| The new name must be distinguishable and contain the word | ds "Limited Liability Company," the designation "LLC" or the abl                        | breviation "L.L.C                     |             |
| Enter new principal offices address, if applicab          |   |                                       |             |
| (Principal office address MUST BE A STREET.               |   |                                       | <del></del> |
|   |   |                                       |             |
| Enter new mailing address, if applicable:                 |   |                                       |             |
| (Mailing address MAY BE A POST OFFICE BO                  |   |                                       |             |
| E STATE BEAT OF THE BO                                    | <u> </u>  | 1 ~                                   |             |
|   |   | 7020 NO                               |             |
| B. If amending the registered agent and/or regi           | stered office address on our records, enter the name                                    | of the next re                        | orietana.   |
| agent and/or the new registered office address h          | nere:   | · · · · · · · · · · · · · · · · · · · | Pistered    |
| N   |   | 757                                   | 1 :         |
| Name of New Registered Agent:                             |   |                                       |             |
| New Registered Office Address:                            |   | - 2                                   |             |
|   | Enter Florida street address  |                                       |             |
| -   | , Florida   |                                       |             |
| Now Postage 4 A Co  | City  | Zip Code                              |             |
| New Registered Agent's Signature, if changing Regi        |   |                                       |             |
| hereby accept the appointment as registered a             | gent and agree to act in this capacity. I further agre                                  | e to comply w                         | vith the    |

## 2

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

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         | Hayden Summit LLC          | 8551 NW 30th Terrace, Miami, FL 33122 | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
|              |                            |                                       | ≣Remove                           |
|              |                            |                                       | Change                            |
| AMBR         | Hayden Summit Trucking LLC | 8551 NW 30th Terrace, Miami, FL 33122 | <b>=</b> Add                      |
|              |                            |                                       | □Remove                           |
|              |                            |                                       | □Change                           |
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|              |                            |                                       | □Remove                           |
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| ffective date, i                       | f other than the date of fili  | ing:  |                                   | (optional)                          |
| an effective date is Note: If the date | is listed, the date must be specific a inserted in this block does not | ind cannot be prior to d<br>t meet the applicable | ate of filing or more than 90 day | ys after filing.) Pursuant to 605.0 |
| ocument's effect                       | ive date on the Department of  | f State's records.                                | .,                                | ing this date will not be listed    |
| 1                                      | 11   |   |                                   |                                     |
| record specifies<br>is filed.          | a delayed effective date, but n  | ot an effective time,                             | at 12:01 a.m. on the earlier      | of: (b) The 90th day after          |
|  | . Ha   |   |                                   |                                     |
| Dated                                  | 4th NOVEMBER   | 2020  |                                   |                                     |
|  | 1/7-   | <u> </u>  |                                   |                                     |
|  |  | -   |                                   |                                     |

Filing Fee: \$25.00

Typed or printed name of signee

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