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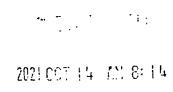
# **COVER LETTER**

TO: Registration Se Division of Co			
SUBJECT:	RUCFIN R	Calty LLC ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subt	nitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
	Snirel	le Rucan  Name of Person	
		Firm/Company	
	9 Poir	iciana lane	
		Address	
	falm (C	CIST, FL 321UH  City/State and Zip Code  City/State and Zip Code	
	E-mail address: (to	o be ased for future annual report notif	ication)
For further information of	oncerning this matter, please ca	At:	
Shire Name o	LÜ RUGIN	at (5) (i) C102-	- 4565 Telephone Number
Enclosed is a check for t	ne 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 Section **Division of Corporations** P.O. Box 6327 Tallahassas EL 20214

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2416 N. Monnos Carone Cuito 910





## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 5, 2021

SHIRELLE RUFFIN 9 POINCIANA LANE PALM COAST, FL 32164

SUBJECT: RUFFIN REALTY LLC Ref. Number: L20000352106

We have received your document for RUFFIN REALTY LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L21000326175 - T.C TRUCKING LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist III

Letter Number: 921A00024077

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLES OF O	RGANIZATION (1)2,
Ol	
RUFFIN Atal	RGANIZATION  F  T LLC  Ty as it now appears on our records.)  Tability Company)
(A Florida Limited L	iability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1200552100.	were filed on NOVEYMBEY 51 <sup>th</sup> 202 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
FC Trucking LLC	TC Freight Waishes LLC
The new name must be distinguishable and contain the words "Emited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	107 RUSE Drive
(Principal office address MUST BE A STREET ADDRESS)	Paim (Wist, FC 32104
Enter new mailing address, if applicable:	9 Poinciana Lane
(Mailing address MAY BE A POST OFFICE BOX)	Palm (1) 15+, FL 32164
	•
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
Palm	CUCIST Florida 32104

### 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.

Cin

Zip Code

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
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		·	□Remove
			Change
	<del></del>		□Add
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<b>fect</b> in ef	rive 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 as nent's effective date on the Department of State's records.
	rd 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 led.
ted	10,13,01
	012
	Signature of a prember or authorized representative of a member