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To:

Page: 2 of 6

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRUCKING PERMITS AND MORE LLC

Account Number : 120140000047 Phone : (813)774-4726

Fax Number : (813)877-2186

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NAT TRUCKING LLC

Certificate of Status Certified Copy Page Count \$25.00 Estimated Charge

COVER LETTER

TO:	: Registration Section Division of Corporations								
		KING LLC							
SUBJECT:									
		Amendment and fee(s) are sub							
ricase	return an correspon	LIESTER LORENZO CA	-						
			Name of Person	, , , , , , , , , , , , , , , , , , , 					
		7016 PARLIAMENT DRI	Firm/Company VE						
		TAMPA FL 33619	Address						
			City/State and Zip Code						
		E-mail address: (to be used for linure annual report noti	fication)					
For furt	her information co	oncerning this matter, please c							
Name of Person		at ()	e Telephone Number						
Enclose	d is a check for the	e following amount:							
≝ \$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)					
	NS-Site at Address	_	Street Addresses						

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

From: Trucking Permits And More LLC

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

2021-01-21 13:54:28 GMT

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City	, Florida	·	Zip Code	
449			•	
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	lity company here: ty Company," the designate designate the designate designate the designate d	lity company here: Ty Company," the designation "LLC" or the indiress on our records, enter the indiress Enter Florida street address City ee to act in this capacity. I further performance of my duties, and I performance of my duties, and I performance of the interpretable of the consideration of t	lity company here: Ty Company," the designation "LLC" or the abbreviated dress on our records, enter the name of City Enter Florida street address	were filed on

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> Fitte</u>	Name	Address	Type of Action
VP	AMANDA TRETO	7016 PARLIAMENT DRIVE	蜀 Add
		TAMPA FL 33619	
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Signature of a member or authorized representative of a member

Typed or printed name of signee

LIESTER LORENZO CAMACHO