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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Section Division of Corpor					
SUBJECT:R	MN Truking 1	L L C ited Liability Company			
The enclosed Articles of Am Please return all corresponde	endment and fee(s) are sub-	mitted for filing.			
Prease return an corresponde	-	arcia Rosado Name of Person			
	Rebut	Hallie Marodo Firm/Company		· 21	
	1284 San	Jerfo Ave Address		2021 JUL 26 PH 2: 08	
		Address FL 32825 City/State and Zip Code	(1) 17 (2) 2 (3) 3 (4) 4 (4) 1	26 PM	j []
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For further information conc	·	·	ication)		
Roberto Garda Name of Pe	Rosado	at (<u>78)</u> 332- Area Code Daytimo	F096 2 Telephone Number	<u></u>	
Enclosed is a check for the fo	ollowing 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 Certificate of Certified Cop (additional copy	f Status & Dy	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RMN Trucking	LLC
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on Jan 08, 2021 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:
RMN Truck? The new name must be distinguishable and contain the words "Limited Liabili	ty-Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1284 Sanderlin Ave = Orlando FL 32825 17
(Principal office address MUST BE A STREET ADDRESS)	Orlando FL 33825 17
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1284 Sanderlin Ale = 17 Orlando FL 328250
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: Role	perto Ivan Gara'a Rosado
New Registered Office Address: /2 5	Finer Florida street address
Ov(and, Florida 37875 City Zip Code
New Designand Aportle Cignature if the union Designand Aports	

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.

Kebuti HarodIf 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
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