LZ1 000061136

| (Requestor's Name) |
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| (Address) |
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| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Document Number) |
| (Excument Number) |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
| Special instructions to Fitting Officer. |
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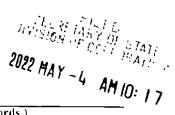
Registration Section Division of Corporations

TO:

| Caliber Tra | - | | |
|---|--|---|---|
| | Name of Lin | ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Edwin Santiago Jr | | |
| | | Name of Person | |
| | Caliber Transport LLC | | |
| | | Firm/Company | |
| | 1013 Crane Crest Way | | |
| | | Address | |
| | Orlando FL 32825 | | |
| | | City/State and Zip Code | |
| | calibertransport509@gmail | | |
| | E-mail address: (| to be used for future annual report not | ification) |
| For further information c | oncerning this matter, please c | all: | |
| Edwin Santiago Jr | | 916 544-8418 at () | |
| Name of Person | | Area Code Daytin | ne Telephone Number |
| Enclosed is a check for the | 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 S Division of C P.O. Box 632 | Section Torporations 7 | Street Address: Registration Se Division of Co The Centre of | rporations Fallahassee |
| Tallahassee, l | rL 32314 | 2415 N. Monro | e Street, Suite 810 |

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Caliber Transport LLC

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

| The Articles of Organization for this Limited I Florida document number L21000061136 | Liability Compar | ny were filed on Fe | puary 03, 2021 and assigned | | |
|---|-------------------------|---|--|--|--|
| This amendment is submitted to amend the fol | lowing: | | | | |
| A. If amending name, enter the new name of | of the limited lia | ibility company he | <u>:re</u> : | | |
| The new name must be distinguishable and contain the | words "Limited Lia | bility Company," the d | esignation "Ll.C" or the abbreviation "L.L.C." | | |
| Enter new principal offices address, if applicable: | | 1013 Crane Cre. | 1013 Crane Crest Way, Orlando FL 32825 | | |
| (Principal office address MUST BE A STREE | ET ADDRESS) | | | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a | | address on our records, enter the name of the new registere | | | |
| agent and/or the new registered office addre | ess here: Edwin Santia | | | | |
| Name of New Registered Agent: | | | | | |
| New Registered Office Address: | 1013 Crane C | | ida street address | | |
| | Orlando | City | Florida 32825 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.

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|-------------------|---------------------------------------|----------------|
| AMBR | Edwin Santiago Jr | 1013 Crane Crest Way Orlando FL 32825 | 🗆 Add |
| | | | □Remove |
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| Changing the office address | | | | | |
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| etive date, if other than the da effective date is listed, the date must be of the date inserted in this block ment's effective date on the Depar | does not meet the ap | plicable statuto | ng or more than 90 ry filing requiren | (optional) days after filing.) nents, this date v | Pursuant to 605 vill not be liste |
| ord specifies a delayed effective da filed. | ite, but not an effecti | ve time, at 12:0 | I a.m. on the ear | lier of: (b) The | 90th day after |
| May 2nd | 2022 | | | | |
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