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(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

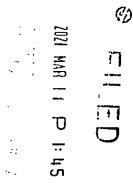
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COVER LETTER

Division of Corpogations	
SUBJECT: CAYEY AY	of Limited Liability Company
The enclosed Articles of Amendment and fee(s) as	re submitted for filing.
Please return all correspondence concerning this n	natter to the following:
	Chris Carey Name of Person
Carey	and Carey Trucking LLC
5450 B	ruce B. Downs Blvd #165
<u> </u>	Chapel FL 33545 City/State and Zip Code
Careyand	Carentrucking Pamail. Com ress: (to be used for future annual report polification)
For further information concerning this matter, ple	ease call:
Chris Carey Name of Person	at (305) 909-5350 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	:. _~ ©
\$25.00 Filing Fee Solution See Sertificate of State	
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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Carey and Care	any as it now appears on our records.)
(A Florida Limited The Articles of Organization for this Limited Liability Company Florida document number \(\bigcup 2 \) \(\bigcup 0 \) \	011010001
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	# 145 Wesley Chapel, FL 33544
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5450 Bruce B. Downs Blvd. # 165 Wesley Chapel, FL 33544
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	<u> </u>
New Registered Office Address: 5450 B	Enter Florida street address 165
Wesley	Chapel, Florida 33544
Name Basistanad Agant's Signature if changing Pagistared Agent	•

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 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	Chris Carey	31349 Glendalough Way	J_ DAdd
	·	Wesley Chapel, FL 3354	5 □Remove
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Iffective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or more Note: If the date inserted in this block does not meet the applicable statutory filing relocument's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on d is filed. Signature of a member or authorized representative of Shere Ha, Williams	than 90 days after fequirements, this the earlier of: (b)	nal). iling:) Pursuant to 605.0 date will notify listed	ed as

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