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COVER LETTER

2.				
SUBJECT: _Rx	Name of Limited Liability Company red Articles of Amendment and fee(s) are submitted for filing. In all correspondence concerning this matter to the following: DENCER A CONGRAY TRANSPORTATION and Deliver Congram (Articles of Person) Rucher A Congram Transportation and Deliver Congram (Articles and Zip Code) Address Manne of Person Area Code Daytime Telephone Number Thing Fee Corrificate of Status Certified Copy (additional copy is enclosed) Street Address: gistration Section Registration Section Registration Section Division of Corporations Division of Corporations			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	DEMERILL	Rucker Name of Person		
	Rucher & Co.	Finn/Company	poistation and	l Deliver L
	201233 N	Address PIACE	<u>. </u>	
		City/State and Zip Code		
	E-mail address: (6	to be used for future annual report notif	OU · COPY_ fication)	
For further information co	oncerning this matter, please ea	ill:		
Demerit	Person		TGL S	()
Enclosed is a check for th	e following amount:		. ,	
□ \$25.00 Filing Fee	-	Certified Copy	Certificate of-Status Certified Copy	
Mailing Address Registration S			ction	
Division of Corporations		Division of Corp	porations	
P.O. Box 6323		The Centre of Ta		
Tallahassee, F	L 32314	2415 N. Monroe	Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on $02/\sqrt{5/2021}$ and assigned Florida document number \(\sum 21000575597 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Demeritt Rucher Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Nyanza Mason
2353 NW 55 Way, 18-203, Lauderhill, FL

Enter Florida street address

Vauderhill Florida 33313

City Zip Code Name of New Registered Agent: New Registered Office Address: 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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
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signature of a member or authorized representative of a member		

Filing Fee: \$25.00