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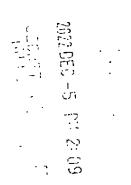
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## **COVER LETTER**

TO:

TO: Registration Sec Division of Corp			
SUBJECT: LEIG	=H TRUCKIN	VG LLC	
SUBJECT:		ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspon	ndence concerning this matter t	o the following:	
	JAPQUELINA	HIBBER	T
	LEIGH TRU	ICKIN/G LLC Firm/Company	
	9301 W S	UNRISE BLYD	2022
	PLANTATION,	City/State and Zip Code  Ca a) 9 Mail. Com  o be used for Juture annual report notific	2022 DEC -5 F11 2: 09
	Hiphertnedi E-mail address: (10	o be used for Juture annual report notific	ration)
For further information co	oncerning this matter, please ca	J.	. 09
DACRIELINE	HIBBERT	at ( <u>954</u> ) <u>205</u> – Area Code Daytime 1	0597
Name of	Person	Area Code Daytime	i elephone Number
Enclosed is a check for th	e 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)
<u>Mailing Address</u> Registration S		Street Address: Registration Sect	ion
Division of Co	orporations	Division of Corpo	orations
P.O. Box 632 Tallahassee, F		The Centre of Ta 2415 N. Monroe	
i alialiassee, r	レッセントマ	E ALD IA. MORROC	District Outer O. C

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LEIGH TRUC	KING d Liability Company A Florida Limited Lia	y as it now appears on our ability Company)	r records.)	
The Articles of Organization for this Limited Lia Florida document number \( \begin{align*} \beg	ability Company w 8 <u>518</u> .	vere filed on <u>Ma (C</u>	h 03, 2021	and assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liabili	ity company here:		
The new name must be distinguishable and contain the wo	ords "Limited Liabilit		on "LLC" or the abbrevi	ation "L.L.C."
(Principal office address MUST BE A STREET	(ADDRESS)			<u></u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B	<u>80X)</u>		:	5 P: 2: 09
B. If amending the registered agent and/or reagent and/or the new registered office address	egistered office ad s here:	ldress on our records	, enter the name of	the new registered
Name of New Registered Agent:	JACQUE	LINE SUNRISE	HIBBERT	
New Registered Office Address:	9301 W	SUNRISE Enter Florida stree	BLVD et address	
	PLANTA	TIV \	, Florida <u>33</u>	322

## 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>	<u>Name</u>	Address	Type of Action
AMBR	JACQUELINE HIBBERT	9301 W SUNRISE BIVD, PLANTA F1. 33322	TOM Add
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			□Change
			□Add
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