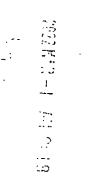
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PICK-UP WAIT MAIL
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Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incserv

ORDER FORM

The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE 3/1/2022

PRIORITY Regular Approval

OUR REF_# (Order_ID#) 1013945

ORDER ENTITY

WAYNECO NATIONAWIDE LLC

PLE	ASE PERFORM THE FOLLOWING SERVICES:
<u> </u>	AYNECO NATIONAWIDE LLC (FL)
	ile the attached amendment and provide a cortified conv

File the attached amendment and provide a certified copy.

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, March 1, 2022 Page 1 of t

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WayneCo Nationwide LLC			
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on outed Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Comp	pany were filed on 3/8/202	1	and assigned
lorida document number L21000111896			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited	liability company here:		
Vaylanders Transport LLC			
he new name must be distinguishable and contain the words "Limited	Liability Company," the designa	ation "LLC" or the abbi	reviation "L.L.C."
nter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRES			
	<u> </u>		702
nter new mailing address, if applicable:			- # <u>5</u>
failing address MAY BE A POST OFFICE BOX)		·	
mining matrices MAT DE ATOST OF TICE BOX			
			7.3
If amending the registered agent and/or registered of	fice address on our record	ls, enter the name	of the new register
ent and/or the new registered office address here:			
Name of New Registered Agent:			
Hame of New Registered Agent.			
New Registered Office Address:	Enter Florida str		
	Enler Florida sii	reei address	
<u> </u>	0.	, Florida	T. C. I
	City		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 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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			Remove
			TChange
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cord specifies a dei s filed.	layed effective date, l	out not an effect	ive time, at 12:	01 a.m. on the	earlier of: (b)	The 90th d	lay after t
ed	3/1/22		······································				
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Filing Fee: \$25.00