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Office Use Only



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## **COVER LETTER**

TO: Registration Se Division of Cor		-	• V		
	- Zoom Truc	king Brokerage LLC			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Zabeli Anwar				
	Name of Person				
	Zoom Trucks, LLC				
Firm/Company					
	10	700 BEACH BLVD. UNIT 169	963		
		Address			
	Jacksonville, FL 32246				
	City/State and Zip Code				
	info@zoom-trucks.com  E-mail address: (to be used for future annual report notification)				
For further information c	e-mail address: ( oncerning this matter, please of		nottrication)		
	oncerning this matter, prease co		_		
Ahmad Nabi		904 729-1265 at ()			
Name o	f Person	Area Code Day	vtime 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 tadditional copy is enclosed)		
Mailing Addres		Street Address			
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ZOOM TRUCKING BROKERAGE 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 Liability Company were filed on March 30, 2021 Florida document number <sup>1,21000148350</sup> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ZOOM TRUCKS, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 1776 ANNISTON RD Enter new principal offices address, if applicable: JACKSONVILLE, FL 32246 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 10700 BEACH BLVD, UNIT 16963 (Mailing address MAY BE A POST OFFICE BOX) JACKSONVILLE, FL 32246 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: AHMAD NABI Name of New Registered Agent: 1776 ANNISTON RD New Registered Office Address: Enter Florida street address \_, Florida 32246 Zip Code JACKSONVILLE

## 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.

City

If Changing Registered Agent, Signature of New

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
MGR	AHMAD NABI	10700 BEACH BLVD. UNIT 16963, JAX FL 32246	■Add
			□Remove
			□Change
			□Add
			□Remove
			🗆 Change
			□Add
			□Remove
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