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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bt	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
		7/12/21 TM

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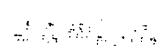
7. H 4. 10 PH 2: 35

COVER LETTER

TO: Registration S Division of Co			.•
Ghost Ryc	der Transportation LLC		•
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Tavarris J Myers		
		Name of Person	
	Ghost Ryder Transporta	tion LLC	
		Firm/Company	
	19046 Bruce B Downs E	Blvd #1005	
		Address	
	Tampa, FL 33647		
		City/State and Zip Code	.
	TavarrisMyers@GhostRy	· ·	
	E-mail address: (to be used for future annual report notific	cation)
For further information of	concerning this matter, please c	all:	
Tavarris J Myers		813 833-2145	
Name o	of Person		Telephone Number
Enclosed is a check for t	the 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)
Mailing Addre		Street Address: Registration Sect	ion
Registration Division of 0		Division of Corp	
P.O. Box 632	•	The Centre of Ta	
Tallahaccae	EL 32314	2415 N. Monroe	Street Suite \$10

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



21 JUN 10 PH 2: 35

Ghost Ryder Transportation LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	City	Zip Code	
	, Florida		
New Registered Office Address:	Enter Florida street address		
Name of New Registered Agent:			
agent and/or the new registered office address here:	address on our records, enter the	name of the new registered	
(Mailing address MAY BE A POST OFFICE BOX)			
Enter new mailing address, if applicable:		05	
	33647		
(Principal office address MUST BE A STREET ADDRES:	Tampa, FL		
Enter new principal offices address, if applicable:	d to amend the following: In the new name of the limited liability company here: Inable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." In address, if applicable: I 19046 Bruce B Downs Blvd #1005 Tampa, FL 33647 I 19046 Bruce B Downs Blvd #1005 Tampa, FL 33647 I 19046 Bruce B Downs Blvd #1005 Tampa, FL 33647 I 2046 Bruce B Downs Blvd #1005 Tampa, FL 33647 I 2046 Bruce B Downs Blvd #1005 Tampa, FL 33647 I 2046 Bruce B Downs Blvd #1005 Tampa, FL 33647 I 2046 Bruce B Downs Blvd #1005 I 2046 Bruce B Downs Blvd #1005		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or t	the abbreviation "L.L.C."	
A. If amending name, enter the new name of the limited lial	bility company here:		
This amendment is submitted to amend the following:			
Florida document number L21000152243			
The Articles of Organization for this Limited Liability Company	y were med on	and assigned	

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		A Committee of the second of t		
<u>Title</u>	<u>Name</u>	Adotes N 10 PH 2: 35	Type of Action	
MGR	Tavarris J Myers	5607 William Grant Way Apt 201 Tam	npa, FL 3361 0 ————	
			□Change	
			□ Add	
			□Remove	
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			🗀 Remove	
			□Change	

		21	110 PH 2: 35	
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	06/01/2021			
ective date, if other than the date must be distinctive date is listed, the date must be	ite of filing: e specific and cannot be prior to da	te of filing or more than 90 c	_ (optional) lays after filing.) Pursuan	nt to 605.0207 (3
te: If the date inserted in this bloc cument's effective date on the Department.	c does not meet the applicable			
culture of the ise	attriction state s records.			
ecord specifies a delayed effective of	late, but not an effective time,	at 12:01 a.m. on the earli-	er of: (b) The 90th d	ay after the
is filed.				
, June 7	2021			
iedi CNCLWW	<u> </u>			

Typed or printed name of signee