

h21000160902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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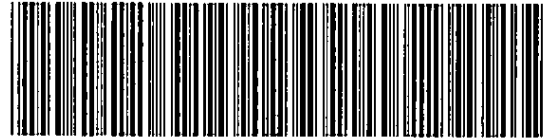
(Business Entity Name)

(Document Number)

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2022 FEB 11 PM 3:20

SECRETARY OF STATE  
FALLS CHURCH, VA

*Name Change*

FEB 24 2022

D CUSHING

February 4 , 2022

Laura V Acuna Bourciquot  
42 East Court  
Royal Palm Beach FL 33411

FILED  
2022 FEB 11 PM 3:20  
SECRETARY OF STATE  
PALM BEACH, FL

Dear Florida Deparment of State ,

My contact phone number is 561-494-4472  
and the return address is 42 East Court Royal  
Palm Beach FL 33411.

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

JILA 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 April 7, 2021 and assigned  
Florida document number L21000160802

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Trucking Liaison Enterprises L.L.C.  
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

401 N Rosemary Avenue  
West Palm Beach  
FL 33401

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

401 N Rosemary Avenue  
West Palm Beach  
FL 33401

**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:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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

**MGR = Manager**  
**AMBR = Authorized Member**

[illegible]

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 02-05-2022

Laura V Acuna Bourciogot  
Typed or printed name of signer

Typed or printed name of signee