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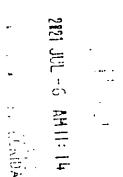
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COVER LETTER

Mailing Address:
Registration Section

TO:

Registration Section
Division of Corporations

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our Liability Company)	records.)	
The Articles of Organization for this Limited Liability Company Florida document number L21000169334	y were filed on APRIL 12.	2021	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	pility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designatio	n "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		,	· <u> </u>
(Principal office address MUST BE A STREET ADDRESS)	·		
			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)		-	
			2721 JUI
		*	<u> </u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records,	enter the name o	
		:	至
Name of New Registered Agent:			=
		100	F
New Registered Office Address:	Enter Florida street	address	 -
	ismer i toridu sireet	temper Cdi)	
	City	, Florida	Zip Code
	cuv		riv Coae

New Registered Agent's Signature, if changing Registered Agent:

TNTA TRANSPORT LLC

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

Zip Code

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>	<u>Address</u>	Type of Action
AMBR	Theodoro Ramos	1656 Dunlap Dr. Deltona. FL 32725	≣Add
			ПRеточе
			Change
MGR Theodoro Ramos	Theodoro Ramos	1656 Dunlap Dr, Deltona, FL 32725	□Add
			■Remove
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fective date, if other than the date of filing:	(optional)
on effective date is listed, the date must be specific and cannot be prior to date of filingte. If the date inserted in this block does not meet the applicable statuto	ing or more than 90 days after filing.) Pursuant to 605.020 ory filing requirements, this date will not be listed a
ocument's effective date on the Department of State's records.	
and an effect of the effective day have a great size of the effective day have been a great size of the effective day and the effective day have been a gr	
record specifies a delayed effective date, but not an effective time, at 12:0 is filed.	1 a.m. on the earlier of: (b) The 90th day after th
nted	
_ Thislaw June	
Signature of a member or authorized represe	antative of a member