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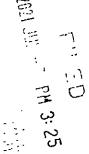
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: GAS1 Trucking 11C Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Diana Abreu Name of Person
Direct billing Services Firm/Company
16350 SW 112 ave
Miam: F(33157
Address Miam: F(33157 City/State and Zip Code directbiling of a Grandil. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Diana Abreu at (786) 325-4407 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

(check has already been) sent & cashed

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G\$S1 Trucking	19 11C		
(Name of the Limited Liability Company (A Florida Limited Lia	bility Company)		
The Articles of Organization for this Limited Liability Company w	ere filed on April 26,202	and assigned	
Florida document number <u>L21000179075</u>	1 1		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	ty company here:		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abb	previation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	<u>n/a</u>		

Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	n/a		
B. If amending the registered agent and/or registered office ad	dress on our records, enter the <u>name</u>	of the new registered	
agent and/or the new registered office address here:			
Name of New Registered Agent:	7/4		
New Registered Office Address:		Zip Code 1	
	Enter Florida street address		
	, Florida	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	•	p (7)	
I hereby accept the appointment as registered agent and agree			
provisions of all statutes relative to the proper and complete p	erformance of my duties, and I am fo	miliar with and	
accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a			

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:

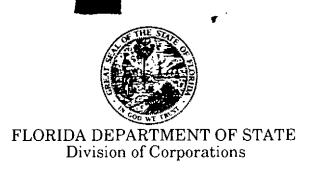
MGR = Manager

AMBR = Authorized Member Type of Action Title **Address** Name Mgr Jogs Garcia-David 704 Pott Lane DAdd

Kissimmee, F1 34759 Remove P Juas Garcia-David 704 Putt lane XAND KISSIMMER F1 34759 Remove _____ Change _____ □Add □Remove _ □Change _____ Remove ___ □Change Remove □ Change Remove

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(If an effective date is Note: If the date is	other than the date of disted, the date must be spe inserted in this block doo ive date on the Departm	of filing: citic and cannot be prior to c es not meet the applicable	date of filing or more than 9 e statutory filing require	(optional) 0 days after filing.) Pursual ments, this date will not	nt to 605.0207 (2 t be listed as th
	a delayed effective date.	but not an effective time	, at 12:01 a.m. on the ca	rlier of: (b) The 90th c	iay after the
cord is filed.	July 19	202/			2021 July
cord is filed.	7	202/	ad recognitative of a	bur	JUT - PH

Filing Fee: \$25.00



July 9, 2021

DIANA ABREU 16350 SW 112 AVE MIAMI, FL 33157 US

SUBJECT: G&S1TRUCKING LLC Ref. Number: L21000179075

We have received your document for G&S1TRUCKING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

SHAMIYA M HARRIS Regulatory Specialist II

2021 (1) 9: 42 PH 3: 26

Letter Number: 321A00015775