K21CCC159043

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





800373854838

09/27/21--01032--004 **25.00

HANCINCIA.

OCT 0.5 7021 FALBRITTON

COVER LETTER

Division of Cor	porations ;	PRCISION	
h Na	Reight PX	CIDIOM	
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
	ndence concerning this matter (_	
r lease return an correspo	nacince concerning this matter t	to the following.	
	Rode Si	milien	
		Name of Person	
		Firm/Company	
	PoBoX	568192 Address F132856	
		Address	
	ORLando	F132856 City/State and Zip Code	<u>, </u>
		·	
	E-mail address: (t	o be used for future annual report notif	ication)
For further information co	oncerning this matter, please ca	ill:	
Rode	Similien	at (321) 276 Area Code Daytime	X137
Traine 6	. 7 - 1304	rica code Paytine	Telephone Tunioci
Enclosed is a check for th	ec following amount:		
\$25.00 Filing Fee	S30.00 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 Address:
Registration Section
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

FREIGHT PROGNAME of the Limited Liability Com (A Florida Limite	npany as it now appears on oud d Liability Company)	r records.)
The Articles of Organization for this Limited Liability Compar Florida document number PRRCISION FREE LAIOO 199043 This amendment is submitted to amend the following:	ny were filed on <u>QPR</u>	
A. If amending name, enter the new name of the limited lis		
PRECISION FREIGHT The new name must be distinguishable and contain the words "Limited Lia	LLC ability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		71 SEP 2
Enter new mailing address, if applicable:		P P
(Mailing address MAY BE A POST OFFICE BOX)		. 6
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	et address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	st.	

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 galliess. Dhereby confirm that the limited liability

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
		Rode Similier Rode Similiem	C Add
1MBR		Rode similiem	[AKemove
			□ Change
			🗆 Add
			□Remove
			□ Change
			□Add
			□ Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			🗆 Remove
			Change

		
<u>ote:</u> If t	ate, if other than the date of filing:	0207 d as
is filed.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t	the
ited	Signature of a member or authorized representative of a member Rode Similar Typed or printed name of signee	
	Signature of a member or authorized representative of a member	