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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Rmail Address:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : 120180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ON ROAD TRUCKING LLC

Certificate of Status	0
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Help

To: 18506176383 From: 12147128131 Date: 05/13/21 Time: 3:19 PM Page: 02/04

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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ON ROAD TRUCKING LLC (Name of the Limite	ed Liability Compa (A Florida Limited)	ny as it now appears on our re- liability Company)	cords.)					
The Articles of Organization for this Limited Liability Company were filed on 01/26/2021				and assigned				
Florida document number 1.21000191405	·							
This amendment is submitted to amend the follo	owing:							
A. If amending name, enter the new name of	the limited link	ility company here:						
A. If amending name, enter the new name of	the minted hab	into company nere.						
The new name must be distinguishable and contain the w	ords "Limited Liabi	hty Company," the designation "	'LLC" or the abbreviation '	L.L.C."				
	808 45th St		κ'n					
Enter new principal offices address, if applicable:		West Palm Beach, FL 334	07	23				
(Principal office address MUST BE A STREE	<u>į ADDRESSį</u>		- <del>- ,, d</del>	ΥM				
			<u> </u>	<u>-</u>				
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		808 45th St		700m	T			
		West Palm Beach, FL 334	07 CST	<u> </u>				
			35.	90				
B. If amending the registered agent and/or r	egistered office	address on our records, <u>e</u> i	nter the name of the n	ew regi	<u>istered</u>			
agent and/or the new registered office address	is here:							
Name of New Registered Agent:			·····					
New Registered Office Address:	808 45th St  Enter Florida street address							
	West Palm Beach City		, Florida <u>33407</u> Zip Code					
New Registered Agent's Signature, if changing I	Senistered Apents	•	,					
<del></del>			I Couthon source to co	mmluuu	ith tha			
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as regibering filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as registered office	e performance of my dutie provided for in Chapter 6	rs, and Lam familiar v 605, F.S. Or, if this do	vith and cument	d			

If Changing Registered Agent, Signature of New Registered Agent

To: 18506176383 From: 12147128131 Date: 05/13/21 Time: 3:19 PM Page: 03/04

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DAKOTAH A DELANCY ETC.	1739 VILLAGE BLVD APT 308	🗀 Add
		WEST PALM BEACH, FL 33409	■Remove
			□ Change
AMBR	BOWLY J SHERROD, SR.	808 45th St	
	BOWLY J SHERROD, SR.  808 45th St  West Palm Beach, FL 33407  Char  Char	Remove	
			☐ Change
			BAdd <b>≥</b>
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			Remove
			Change
			□Remove
			Change
			🗆 Add
			□Remove

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Note: If the c	late inscrited in the	his block does	not meet the	e applicable	statutory fil	ing require	ments, this d	ate will not be	: listed a
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Dated MAY	13		2	<u> </u>					
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Typed or printed name of signee