## 421000228339

(Requestor's Name)
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ATT ASSAURCE EL GERY

AUG 2 5 2022 S. PRATHER

## **COVER LETTER**

TO:

TO: Registration S Division of Co					
	ity Cameras Services LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Kelsey				
	<del></del>	Name of Person			
	ZenBusiness Inc				
		Firm/Company			
	5511 Parkerest Dr., STE D	03			
		Address	**************************************		
	Austin, TX 78731				
		City/State and Zip Code			
	fulfillment@zenbusiness.cc	om to be used for future annual report notif	testion)		
For further information	concerning this matter, please of		incurrent)		
Kelsey c/o ZenBusines	s Inc	844 493-6249			
Name	of Person	Area Code Daytime	e Telephone Number		
Enclosed is a check for	the following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.(#) Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addr Registration		Street Address: Registration Se	ction		
Division of Corporations		Division of Cor	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of T			
i ananassee.	. 」し ブムブ いせ	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MG Security Cameras Services 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  $\frac{05/17/2021}{1}$ Florida document number L21000228339 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: MG Trucks Runner Services LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L." or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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

## 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.

Civ

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
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			Change

D. If amending any other infor	mation, enter c	change(s) here:	(Attach additt	ional sheets, if nece	essary.)		
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E. Effective date, if other than (If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the	s block does not r	meet the applical	o date of filing or n ble statutory filin	(option or than 90 days after the requirements, this	onal) filing.) Pursuant to a date will not be	605.0207 listed as	(3)(t the
f the record specifies a delayed effe ecord is filed.	ctive date, but not	t an effective tim	ne, at 12:01 a.m.	on the earlier of: (b	The 90th day a	fter the	
Dated June 7			<del>-</del> ·		ÄLLAHASSEE, PLORIDA	2022 JUN 10 PM 6: 30	1: nD
/s/ Masist	Garcia Signature of a	member or author	ized penrocentative	of a member		PH	U
Masiel Garcia	N suffragrate of a	menner of author	naca representative	. Of a member	S (A) c LORID	6: 3(	
		Typed or printed	l name of signee				