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SUBJE	СТ:	Fast	Flow TR Name of	AUS f Limited L	PORTL iability Company	<u>LC</u>	char Br	eacons	van li
The end	closed Artic	cles of Amo	endment and fee(s) ar	e submitte	d for filing.				
Please	return all co	orresponder	nce concerning this n	atter to the	e following:				
		-	Ryan	3	Name of Person	rds			
		1 _			Firm/Company				
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	_	Address: ution Sect n of Corp			Reg	et Address: istration So ision of Co		ıs	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 AUG II - MM 9: 44

Zip Code

1-ast 1-low 1ra	insit LLC
(Name of the Limited Liability Comps (A Florida Limited	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>レンド つのの2つ056</u> 6	were filed on June 10, 2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab Beacons Van lines	11c
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2500 Hollywood Blud
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1-1011ywood, Fl. 33020 2500 Hollywood Blyd Suite 484 Hollywood, FL 33020
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
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.

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
			□Add
			□Remove
			□Change
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			□Change
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). If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effect Note: If	e date, if other than the date of filing:
the record s cord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	7/29/2022
X ²	Signature of a member or authorized representative of a member
· /	Typed or printed name of signee

Filing Fee: \$25.00