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COVER LETTER

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Registration Section

Tallahassee, FL 32314

TO:

Div	ision of Cor	porations		
eum irot.	Varis Empi			
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Bernes Varis		
			Name of Person	
		Varis Empire LLC		
			Firm/Company	
		1451 W. Cypress Creek Re	oad Suite 300	
			Address	
		Fort Lauderdale, FL 33309)	
		-	City/State and Zip Code	
		varisempirellc@varisempire		
		E-mail address: (to be used for future annual report noti	fication)
For further in	nformation c	oncerning this matter, please ca	all:	
Marline S. V	'aris		561 597-9799 at ()	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a	check for th	ne following amount:		
≡ \$25.00 F	Filing Fee	☐ \$30.00 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)
Mai	iling Addres	E.	Street Address:	
	gistration S		Registration Se	ction
Div	ision of C	orporations	Division of Cor	porations
P.C). Box 632	7	The Centre of T	l'allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Varis Trucking LLC			
(Name of the Limited (A	Liability Compa Florida Limited I	ny as it now appears on our recor Liability Company)	<u>(ds.</u>)
The Articles of Organization for this Limited Liab	ility Company	were filed on July 6, 2021	and assigned
Florida document number L21000308554	·		
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	<u>se limited liab</u>	ility company here:	
Varis Empire LLC			
The new name must be distinguishable and contain the word	ls "Limited Liabil	ity Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	1451 W. Cypress Creek Road	
Principal office address MUST BE A STREET	ADDRESS)	Suite 300	2023 SEC
		Fort Lauderdale, FL 33309	
Enter new mailing address, if applicable:		1451 W. Cypress Creek Road	# - F
Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>	Suite 300	
	 -	Fort Lauderdale, FL 33309	FP. C
B. If amending the registered agent and/or reg agent and/or the new registered office address I Name of New Registered Agent:		nddress on our records, <u>ente</u>	r the name of the new registere
New Registered Office Address:	1451 W. Cypre	ss Creek Road Suite 300	
		Enter Florida street addre	355
	Fort Lauderdale	, r	lorida 33309
		City	Zip Code

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 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
MGR/AN	Bernes Varis	1451 W. Cypress Creek	□ Add
		Suite 300	
		Fort Lauderdale, FL 33309	
MGR/AM	Marline S. Varis	1451 W. Cypress Creek	-
		Suite 300	□Remove
		Fort Lauderdale, FL 33309	
			□Add
		 	Remove
			□Change
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

Effective date, if other than the date of filing: 21/1/2023 [In effective date, if other than the date of filing: 21/1/2023 [In effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0201 Note: 1 the date inserted in his block does not need the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records. Precord 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 dis filed. Dated Signature of a member or authorized representative of a member.		
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Filing Fee: \$25.00