## Florida Department of State

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

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

Email	Address:		
rmall	ADDITESS:		

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ROEBUCK LOGISTICS, LLC

Certificate of Status	0
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## ARTICLES OF AMENDMENT TOARTICLES OF ORGANIZATION OF

Roebuck Logistics, LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L21000331183}{L21000331183}$	were filed on 07/21/21	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the a	bbreviation "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 agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, enter the nat	ne of the new registered
New Registered Office Address:	Enter Florida street address	77 77
	, Florida	2 P 0 0 Y
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	- 00

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
AMBR	BRIAN ROEBUCK, JR	455 NE 5TH AVE. SUITE D. #206	j □Add
		DELRAY BEACH, FL 33483	⊠Remove
			□Change
AMBR	Brian Keith Roebuck Sr.	2541 ROSEHAVEN RD	t&:Add
		West Palm Beach, FL 33415	□Remove
			□Change
AMBR	Edward Roebuck Jr.	2541 ROSEHAVEN RD	&I Add
		West Palm Beach, FL 33415	□Remove
			□Change
			□Add
			Remove
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			المسمئة مسمأة	
Effective date, if other than the offective date is listed, the date must	late of filing: be specific and cannot be r	rior to date of filing or m	ore than 90 days after filing	;.) Pursuant to 605.0207
Note: If the date inserted in this blo-	ck does not meet the ap	plicable statutory hung	g requirements, this date	will not be listed as
document's effective date on the De	partment of State's reco	ras.		
	ce		on the appliance (b). Th	ha 90th day after the
e record specifies a delayed effective (d is filed.	date, but not an effective	ze time, at 12101 a.m. (	m the carrier (ii. (ii)	ne me and the
May 25	2022			
r IVIAV ZJ		<del></del> '		
Dated May 25	<u> </u>			
	More	- Ooke-		
	Signature of a member or a	authorized representative	of a member	
		nuthorized representative	of a member	

Filing Fee: \$25.00