

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 : (855)330-1010 Fax Number

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

Email Address:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CASHIN CARRY TRANSPORTATION LLC

Certificate of Status 0 Certified Copy 04 Page Count \$25.00 Estimated Charge

APR - 8 2022

Electronic Filing Menu Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CASHIN CARRY TRANSPORTATION LLC

(Name of the Limited Liability Company as it now appears on our records.)

(X Florida Limited L	lability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000331837</u>	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 liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabil	
Enter new principal offices address, if applicable:	5831 COUNTRY LAKES DRIVE
(Principal office address MUST BE A STREET ADDRESS)	FORT MYERS, FL 33905
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	oddress on our records, enter the name of the new registered
Name of New Registered Agent:	7 S 20 20 20 20 20 20 20 20 20 20 20 20 20
New Registered Office Address:	Enter Florida street address , Florida Zip Codic
New Registered Agent's Signature, if changing Registered Agent:	DRE TE
I hereby accept the appointment as registered agent and agraprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

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>	Name	Address	Type of Action
			\ \ \ \ \ \
			□Remove
			□Change
			□ Add
			□Remove
			□Add
			□Remove
			Change
			□Add
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			□Add
			□Remove
			□Change

Effective date, if other than the date of filing: [an 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 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records. The record 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. Nated 04/06				
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Morgan Noble		Typed or printe	d name of signee	

Filing Fee: \$25.00