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COVER LETTER

TO: Registration Section

Division of Cor	porations		•
SUBJECT: 0 \	AA Trucking	ا دد	
	Name of Lift	fited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Hermil	o Arizmendi	
		Name of Person	
	Sel		
		Firm/Company	
	3335 0	oxwood Drive	
	<u> </u>	Address Address	
	Wesley (inapel FL 3350	13
		City/State and Zip Code	
	DHATICLE	ing @ yahoo. (or to be used for future annual report notific	N ····································
For further information c	oncerning this matter, please c	all:	Telephone Number S. F. 31
ا معاده	leiaa Vi	&13 =. u	<u> </u>
Hermilo A	f Person	at ())) Area Code Daytime	Telephone Number
Traine ()	11 013/21	7.100 0000 774,11110	
Enclosed is a check for the	he following amount:		771
\$\$\$\$25.00 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)
Mailing Addres		Street Address: Registration Sect	tion
Registration Section Division of Corporations		Division of Corp	
P.O. Box 632	·	The Centre of Ta	
Tallahassee, l	FL 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	king LLC	
(Name of the Limited I. (A F	iability Company as it now appears on our reco lorida Limited Liability Company)	erds.)
The Articles of Organization for this Limited Liabil	lity Company were filed on 8 1091	and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
	The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "Li
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO.	<u></u>	· · · · · · · · · · · · · · · · · · ·
		2
B. If amending the registered agent and/or regis		er the name of the new registered
agent and/or the new registered office address he	ere:	$\frac{1}{\omega}$
Name of Nam Davistored Agents		
Name of New Registered Agent:		25.
New Registered Office Address:	Enter Florida street add	ress
-	City	Florida 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 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
MER	Rosa D. Sanclemente	3325 Oakwood Drive Wesley Chapel FL3354	🔁 Add
			□Remove
			□Change
			□Add
			🗆 Change
			□Add
			Remove
			Remove Contrarge Contrarge Contrarge
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n effectiv <u>te:</u> If ti	s effective date on the Department of State's records.		
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