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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Benald Transport LLC Name of Limited Liability Comp	any
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Benald Fred Name of Per	Transport LLC Name of Limited Liability Company ticles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following: Penald Frederic Name of Person Penald Transport Filme Company 950 South Pine Tsland Rd Suite 150 Address Plantation FL 33324 City/State and Zip Code (enaldfrederica Roman) Lemail address: (to be used for future annual report notification) mation concerning this matter, please call: Frederic Name of Person at (754) Area Code Daytime Telephone Number
Bengld Transport	! LLC
950 South Pine I	Sland Rd Suite 150
renaldfrederizz @ cimai E-mail address: (to be used for future	annual report notification)
For further information concerning this matter, please call:	
Renald Frederic at (75) Name of Person Area Co	de Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status Certified C	Copy Certificate of Status & Certified Copy

Mailing Address:

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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Menald Transport	LLC
(Name of the Limited Liability Company (A Florida Limited Lia	iy <u>as it now appears on our records.</u>) ability Company)
The Articles of Organization for this Limited Liability Company w	were filed on 8-19-2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	lity company here:
The new name must be distinguishable and contain the words "Limited Liability	
Enter new principal offices address, if applicable:	202
(Principal office address MUST BE A STREET ADDRESS)	
D. A. C.	7 2
Enter new mailing address, if applicable:	9 3
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
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.

1f 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
MGR	Renald Frederic	2830 Somerset Dr H3	06 <u>F</u> AW
		Lauderdale Lakes	□Remove
		FL 33311	□Change
			□Add
			□Remove
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effective date is listed, the date te: If the date inserted in th	is block does not r	neet the applical	odate of filing or mole statutory filin	ore than 90 days aft g-requirements, tl	er filing.) Pursuan ais date will not	t to 605,020° be liste d as
nument's effective date on the	ne Department of S	State's records.				
cord specifies a delayed effe	ective date, but not	t an effective tim	ne. at 12:01 a.m. (on the earlier of:	(b) The 90th d	av after the
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s filed.		, <u>2021 </u>	_ ·			
is filed. ted <u>OC+Ober 13</u>	Signature of a	XX.	ided representative			

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