## L21000386690

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(Address)				
(Add	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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SECRETARY OF STATE

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## **COVER LETTER**

TO:

TO:	Registration Se Division of Cor			4	
aun ie		OLLER CARRIER LLC			
Name of Limited Liability Company					
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		ARTURO TAN-YI			
			Name of Person		
		STEAM ROLLER CARR	ER LLC		
Firm/Company				***************************************	
		11719 SW 113TH TERRA	CE		
			Address		
		MIAMI, FL 33186			
			City/State and Zip Code	<del></del>	
		5718@BELLSOUTH.NET	to be used for future annual report n	atification)	
For furtl	ner information c	oncerning this matter, please co		orneation	
ROCIO	TAN-YI		305 979-6777		
	Name o	f Person		ime Telephone Number	
Enclose	d is a check for th	ne following amount:			
<b>■ \$</b> 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 Address: Registration Section		Street Address:			
Division of Corporations		Division of C	Registration Section Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

STEAM ROLLER CARRIER LLC

2021 OCT 38 PH 4: 52

(Name of the Limited Liability Company as it now appears on our records RETARY OF STATE The Articles of Organization for this Limited Liability Company were filed on  $\frac{08/30/2021}{}$ and assigned Florida document number L21000386690 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: N/A Name of New Registered Agent: N/A 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.

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>	<u>Address</u>	Type of Action
RA	ROCIO TAN-YI	11719 SW 113TH TERRACE	□Add
		MIAMI, FL 33186	Remove
			Change
			□ Add
			□Remove
		<del></del>	□Change
			□Add
		<del></del>	Remove
			Change
			□ Add
		<del></del>	□Remove
			□Change
	<del></del>		□ Add
		<del></del>	Remove
			Change
			□Add
			□Remove
			□ Change

Typed or printed name of signee