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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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MAR 1 6 2022

D CUSHING

COVER LETTER

TO: Registration Section of Corp.				
SUBJECT: DL	Name of Limited Liability Company)		
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.			
Please return all correspon	ndence concerning this matter to the following:			
	Delia Walker Cobb Name of Person			
	DLB Logistics, LLC Firm/Company			
	10950 Lydia Estates De Address		2	
	Jackson ville, FL. 32218 City/State and Zip Code		2022 MAR -4	*****
	City/State and Zip Code Adbhell 3 @ gmail. Com E-mail address: (to be used for future annual report notification)			
For further information co	oncerning this matter, please call:		2։ կկ	الديين
Delia Cobb Name of	Person at (904) 635-353651 Area Code Daytime Telephone Number		•	
Enclosed is a check for the	e following amount:			
☐ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee &	te of Stat Copy	tus &	
Mailing Address:				

Registration Section

TO:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

RECEIVED

2022 MAR -4 AM 8: 03

SECRETARY OF STATE TALLAHASSEE, FL

February 8, 2022

DELIA WALKER COBB D & D SIGOURNEY TRUCKING, LLC 10950 LYDIA ESTATES DR JACKSONVILLE, FL 32218

SUBJECT: D & D SIGOURNEY TRUCKING, LLC

Ref. Number: L21000393513

We have received your document for D & D SIGOURNEY TRUCKING, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

www.sunbiz.org

Letter Number: 322A00003082

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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D + D Sigourney Ti	rucking, LLC
(Name of the Limited Liability Co. (A Florida Lim	ompany as it now appears on our records.) nited Liability Company)
The Articles of Organization for this Limited Liability Complete Florida document number \(\begin{aligned} \begin{aligned} \lambda \lambda \rightarrow \rightarrow \lambda \rightarrow \lambda \rightarrow \rightarrow \lambda \r	
A. If amending name, enter the new name of the limited	Liability company here: JOAN E. R. Services LLC Liability Company." the designation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRES.)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City 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 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 Lydia	Type of Action
<u>OWher</u>	Brittany Walker	10950 tydia Estates Dr	Þ⁄Add
		Jackson ville, FL 32218	□Remove
			□Change
Dwiner	Delia Et Walker- isi	10/10950 Lydia Estates DR	□Add
		Jucksonville, FL 32218	□Remove
			\(\overline{\sum_Change}\)
Mar	Derva Libb	18950 Lydia Estates 1) i2_ (Add
		Jacksonville, FL 32218	Remove
			□ Change
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Effectiv	e date, if other th	an the date of	filing:	data of filing or more the	(optional) n 90 days after filing.) Pursu	ent to 605 0207 (3
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d is filed	d.				earlier of: (b) The 90th	day after the
Yatud	Jan 11		2022	ンりり zed representative of a m		
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Typed or printed name of signee