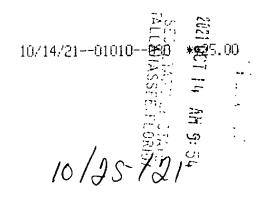
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COVER LETTER

TO:

SUBJECT:	THE ROO	STER CARGO LLC	
	Name of Lir	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	CA		
		Name of Person	
	THE	are submitted for filing. matter to the following: CARLOS A GARZON DIAZ Name of Person THE ROOSTER CARGO LLC Firm/Company 1509 MAYDELL DR Address TAMPA, FL 33619 City/State and Zip Code cacho4271@gmail.com dress: (to be used for future annual report notification) ease call: at (813) Area Code Daytime Telephone Number	
		Firm/Company	
	Name of Limited Liability Company osed Articles of Amendment and fee(s) are submitted for filing. thurn all correspondence concerning this matter to the following: CARLOS A GARZON DIAZ Name of Person THE ROOSTER CARGO LLC Firm/Company 1509 MAYDELL DR Address Address TAMPA, FL 33619 City/State and Zip Code Cacho4271@gmail.com E-mail address: (to be used for future annual report notification) er information concerning this matter, please call: CARLOS A GARZON DIAZ Name of Person Area Code Duytime Telephone Number Area Code Certificate of Status Certificate Copy (additional copy is enclosed) Certificate Of Status Certificate Copy (additional copy is enclosed) Certificate of Status Certificate Of Status		
THE ROOSTER CARGO LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: CARLOS A GARZON DIAZ Name of Person THE ROOSTER CARGO LLC Firm/Company 1509 MAYDELL DR Address TAMPA, FL 33619 City/State and Zip Code Cacho4271@gmail.com E-mail address: (to be used for future annual report notification) for further information concerning this matter, please call: CARLOS A GARZON DIAZ Name of Person Area Code Daytime Telepho S25.00 Filing Fee Certificate of Status Certificate Copy (additional copy is enclosed) Mailing Address: Registration Section Division of Corporations P.O. Box 6327 The Centre of Tallahas		Address	 ,
		•	
			tification)
For further information (•	,
CARLOS A	GARZON DIAZ	at (813) 564 - 6	293
Name o	of Person	Area Code Daytii	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Address	vg•	6	
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Division of C	Corporations	Division of Co	rporations
i alianassee, l	FL 32314		
		Tallahassee, FI	_ JZJUJ

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		R CARGO LLC		 -
1. <u>- Annie 191 (11 - 13 - 13 - 13 - 13 - 13 - 13 - 13</u>	(A Florida Limit	mpany as it now appears ted Liability Company)	s on our records.	
The Articles of Organization for this Limited I	Liability Compa	any were filed on	09/30/2021	and assigned
Florida document numberL210004302	.99			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited l	iability company her	<u>re</u> ;	
NONE				
The new name must be distinguishable and contain the	words "Limited Li	ability Company," the de	signation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	NONE		
(Principal office address MUST BE A STREE	ET ADDRESS)			~
				_ 26 6
Enter new mailing address, if applicable:		NONE		DCT 14
(Mailing address MAY BE A POST OFFICE	' <u>ΒΟ</u> Χ)			(A) 12
				3
B. If amending the registered agent and/or agent and/or the new registered office addre	registered offic ss here:	e address on our re	cords, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:	NONE			
New Registered Office Address:	NONE			
		Enter Floru	la street address	
		NONE	Florida	NONE
		Ciŵ		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.

NONE	
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

Title	<u>Name</u>	Address	Type of Action
AMBR	CARLOS A GARZON DIAZ	1509 MAYDELL DR TAMPA, FL 33619	□Add
			□Remove
			= Change
			□Remove
			□Change
			□ Add.
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ted	October 07	 , ,	2021	<u>.</u>			
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Filing Fee: \$25.00