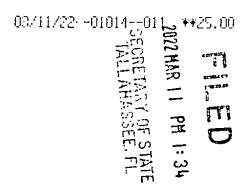
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## **COVER LETTER**

TO: Registration Division of C	r Section Corporations	¥	,
B.O.A.C	) Transports LLC	••	
SUBJECT:	) Transports LLC Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	SirrayWhitlock		
		Name of Person	
	B.O.A.O. Transports		
		Firm Company	·
	7203 Rex Hill Trail		
		Address	
	Orlando, FL 32848		
		City/State and Zip Code	
	boaotransports@gmail.com E-mail address: (	to be used for future annual report noti	fication)
For further informatio	on concerning this matter, please c	all:	
Sirray Whitlock		720 883-2120	
Nan	ne of Person	at ()	e Telephone Number
Enclosed is a check fe	or the following amount:		
\$25,00 Filing Fee	(L) \$30.00 Filing Fee & Certificate of Status	L) \$55.00 Filing Fee & Certified Copy (additional copy is erclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address: 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 Tallabassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAR 11 PM 1: 34

B.O.A.O Transports LLC

(Name of the Limited Liability Company as it now appears on our records.) SECRETAR.

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on October 13, 2021

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 MIST BE A STREET ADDRESS)

Enter new 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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address.

## 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>	Address	Type of Action
MGR	Sirray Whitlock	7203 Rex Hill Trail	<b>⊞</b> Add
		Orlando FL 32818	
		· ·· · · · · · · · · · · · · · · · · ·	[][Change
AMBR	Duvet Sims	1961 S. Ivory Way	
		Aurora CO 80013	
			[]Change
MGR	Dah'Shaun Whitlock	7203 Rex Hill Tail	!_lAdd
		Orlando FL 32818	
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ecord specifies a delayed effectis filed.	tive date, but not an	effective time, at	12:01 a.m. on the	earlier of: (b) The	90th day after the
ated March 3	<u></u>	2022			
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