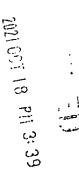
L21000450162

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only

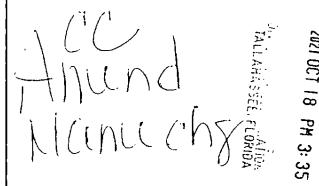


300374808423



10/19/21--01901--001 **25.00

10/19/21--01001--092 **30.00



OCT 1 8 2021

I ALBRITTON

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Coldming Trucking Company, 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:
Clarence D. Siler Name of Person
Firm/Company
1317 & Edgavator Dr. Dito 41de
Ortando P. 33604 City/State and Zip Code
Gold minetrouxing 60 Ognal Com E-mail address: (to be used for further annual report-notification)
For further information concerning this matter, please call:
Clarrone D. Silor at (402) 246-98-14 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, 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 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cook Wind Trocking Company as it now appears on our records.)

(Name of the Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on NOT STATE 2021 and assigned Florida document number L21000450162. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here:	
A. If amending name, enter the new name of the limited liability company here:	
0.1391 5.5 0.7	
Could Star Express Trupking, LIC	
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)	1 3
	·
i, γ, ν,	
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: Name of New Registered Agent:	<u>ered</u>
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 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 to 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 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	Name	Address	Type of Action
mer	Clarerro Silar	1139 Ginsburg Drive	^ S∧d d
		1139 Ginsberg Drive Daytina Brach, Fl 32114	□Remove
		-	Change
MGR	Phyllow R. Harrygton	502 Whitebork Dr.	OPA dd
	Harrygton	502 Writzbark Dr. Lafayotta, La 70508	□Remove
		<u>-</u>	🗆 Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

. 11 4111	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) EIN 87-3130698
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Note:	ive date, if other than the date of filing: 10/18/1000 (optional) (optional) (ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
ne recoi ord is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	10/18/ Careure D. Lile Signature of a member or authorized representative of a member
	Clarence Siler Typed or printed name of signee

Filing Fee: \$25.00