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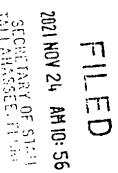
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(Document Number)
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COVER LETTER

Registration' Section

Tallahassee, FL 32314

TO:

Div	ision of Corp	porations	¥	. 	
	Sanz Fast T	rucking, LLC			
SUBJECT:		Name of Limi	ted Liability Company		
The enclosed	d Articles of .	Amendment and fee(s) are subr	nitted for filing.		
Please return	ı all correspo	ndence concerning this matter t	o the following:		
		Ernesto Sanchez			
		Emesto sanchez			
			Name of Person		
		Sanz Fast Trucking, LLC			
			Firm/Company		
		655 Sanctuary RD			
			Address		
		Naples, Florida 34120			
			City/State and Zip Code		
		SanzFastTrucking@gmail.c			
		E-mail address: (1	o be used for future annual repo	rt notification)	
For further i	nformation c	oncerning this matter, please ca	all:		
Ernesto Sanchez		239 238-49 at ()		_	
	Name o	f Person	Area Code E	Daytime Telephone Number	
Englosed is	a check for th	he following amount:			
		_		E 6(0.00 F); F-	
■ \$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fe Certificate of St Certified Copy (additional copy is	tatus &
	ailing Addre:		Street Addre		
	egistration		Registratio		
		Corporations		f Corporations	
P.	O. Box 632	27	The Centre	e of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 NOV 24 AM 10: 56

Sanz Fast Trucking, LLC		_	SECRETARY OF STATE		
(Name of the Limited Liability Company (A Florida Limited Liability Company)	y as it now appeability Company	ears on our recor	#ELAHASSEE. PEHE		
The Articles of Organization for this Limited Liability Company w Florida document number <u>12100481386</u> .	vere filed on _	11/5/2021	and assigned		
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabili	ity company	<u>here</u> :			
The new name must be distinguishable and contain the words "Limited Liability	y Company," the	e designation "LL	C" or the abbreviation "L.Ł.C."		
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)					
	_				
Enter new mailing address, if applicable:			<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)	 -	<u></u> .			
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on oui	r records, <u>ente</u>	er the name of the new registered		
Name of New Registered Agent:					
					
New Registered Office Address:	Enter F		ress		
	. Florida				
	City	, r	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as po- being filed to merely reflect a change in the registered office of	performance rovided for it	of my duties, n Chapter 605	and I am familiar with and 5, F.S. Or, if this document is		

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Ernesto Sanchez	655 Sanctuary RD, Naples, FL 34120	
			□Remove
			Change
			□Add
			□Remove
			□Change
			🗆 Add
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in effective date is listed, the date of the list of the date inserted in the secure of the country of the list of	e must be specific and is block does not n	l cannot be prior neet the applic	to date of filicable statutor	ng or more thar	(optio n 90 days after firements, this	filing.) Pursuant to 6	605.020 isted as
ecord specifies a delayed effects is filed.				l a.m. on the	earlier of: (b)	The 90th day a	fter the
ated 11/22/20	02/	,					
	· (/g/_			- , =			
	Signature of a	member or author	orized represo	entative of a m	ember		

Filing Fee: \$25.00