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SECRETARY OF SHALE

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## **COVER LETTER**

Registration Section

**Division of Corporations** 

Tallahassee, FL 32314

TO:

Besaw & B	lesaw Transportation LLC					
SUBJECT.	Name of Lin	nited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:		•		
	Timmy Joe Besaw					
	***	Name of Person				
		Firm/Company				
	326 Abby Drive					
		Address				
	Polk City Florida 33868	SECR TAL	2022			
	mikbes6094@gmail.com	City/State and Zip Code	LAHA	<u> </u>		
	E-mail address: (	to be used for future annual report noti	<b>37</b> –			
For further information c	oncerning this matter, please c	all:	<u>កាស</u> បា <sub>ស</sub>	PH S. S.		
Timmy Besaw		352 544-9()4()	[***	96		
Name o	f Person	Area Code Daytim	e Telephone Number			
Enclosed is a check for the	ne following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified Copy	icate of Status &		
Mailing Addres Registration S		<u>Street Address:</u> Registration Se	ction			
Division of Corporations		Division of Corporations				
P.O. Box 632		The Centre of 1	•			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Besaw & Besaw Transportation LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{1/5}{2022}$ and assigned Florida document number 1.22000013290 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: 326 Abbey Drive 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.

City

Polk City

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	<u>Address</u>	Type of Action
Ambr	Timmy Joe Besaw	326 ABBEY DR	□Add
		POLK CITY, FL 33868	□Remove
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			□Remove
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is filed. عمل							
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