L22000053352

(Re	questor's Name)	
(,,,	questor s rearray	
(Ad	dress)	
(Address)		
(Cit	y/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
		
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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A. RIVERS

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COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJE	СТ:	Total of 6 Tra	ansport LLC ited Liability Company	
The enc	losed Articles of a	Amendment and fee(s) are sub	omitted for filing.	
Please r	eturn all correspor	ndence concerning this matter	to the following:	
		Richa	Vd J. Knighton II	<u></u>
		Total of	Firm/Company	<u>C</u>
		1001 Great	- Calcs Drive	
		<u>Daytona</u>	Blach, FL 3211 City/State and Zip Code 03 @ gahvo. Cum to be used for there annual report not	7
		Pay day of Espail address:	03 @ gahvo, com	dication
For furt	her information co	oncerning this matter, please ca		
	Richard J.	Cnighton THE	at (<u>386)</u> <u>340-1</u> Area Code Daytin	065 ne Telephone Number
Enclose	d is a check for th	e following amount:		
V ± \$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

10tal of 6 Transpor		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	<u>ony as it now appears on our reco</u> Liability Company)	<u>rds.</u>)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L22000053352}{L}$	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
Rich Universal LLC		
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	•	Lead Reflue Blod FL 32114
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1001 Great Oak Daytona Beach, t	s Drive FL 32117
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addi	CSS
	, F	Florida
		Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my duties.	and I am familiar with and

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, <u>enter the title, name, and address of each person_being addedor removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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			□Change
			□Add
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(If an eff <u>Note:</u>	ve date, if other than the date of filing:
the recor- cord is fil	d specifies a delayed effective date, but not an effective time, at 42:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	May 10 . 2023 Signature of a member or authorized representative of a member
	Rushavola K. TVLY Typed or printed name of signee