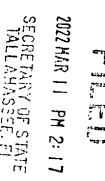


(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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Q. SILAS
MAR 2.2 2022

Office Use Only





COVER LETTER

TO: Registration Sc Division of Cor		,	
SUBJECT: <u>Yel</u>	low equipment Name of Lim	LLC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Ahmed Al	bougerdia Name of Person	
	yellow eq	uipment LLC Firm/Company	
	5171 Ehrlic	h Rd Suite la	1 <u>A</u>
	Tampa, E	LORIDA 336 City/State and Zip Code	24
	_	io be used for future annual report not	OIIC · Com
For further information e	oncerning this matter, please co	ill:	
Ahmed Al	pougendia Person	at (<u>\$13</u>) <u>454</u> Area Code Daytime	e Telephone Number
Enclosed is a check for ti	ne following amount:	_	
□ \$25,00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$255,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. 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 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Uclow Registration of the Limited Liability Company as it now appears on our records TATE (A Florida Limited Liability Company)

SECRETARY OF STATE (A Florida Limited Liability Company)

	City	Zip Coele
	Flori	ida
New Registered Office Address:	Enter Florida street address	,
Name of New Registered Agent:		
Norman of New Development Amounts		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, <u>enter th</u>	e name of the new registered
(Mailing address MAY BE A POST OFFICE BOX)		
Enter new mailing address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new principal offices address, if applicable:		
The new name must be distinguishable and contain the words "Limited Biabil	ity Company," the designation "LLC" of	or the abbreviation "L.L.C."
A. If amending name, enter the new name of the limited liab		
This amendment is submitted to amend the following:		
The Articles of Organization for this Limited Liability Company Florida document number <u>L 22000 85132</u>	were filed on O'C 1 CC	1 2022 and assigned
The Articles of Organization for this Limited Liability Company	were filed on 67 172	1.2c2.2 and assigned

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
			□Add
			□Remove
			□Change
<u> </u>			□Add
			□Remove
			DChange
			Change
		 	
			□Remove
			□Change
			□Remove
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ote: If the	date inserted i	n this block does	filing: fic and cannot be pri not meet the appl it of State's record	icable statutory fil	(option more than 90 days after ling requirements, this	onal) filing.) Pursuant to 605.0 s date will not be listed)207 d as
is filed.	·). The 90th day after	the
ated	3/8/2	022		·	ve of a member		
	Alua!	Hulin	- San Marian and Andrews	horized representati	vo at a member		
		Signature	e or a memore or an	than careful comme	ve or a memory		