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(Requestor's Name)			
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(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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COVER LETTER

TO: Registration S Division of Co						
AMERICA	AN K & OTT TRANSPORTAT	ION LLC				
SUBJECT:	Name of Lin	nited Liability Company	-			
	Amendment and fee(s) are sub	-				
Please return all correspondent	ondence concerning this matter	to the following:				
	KARELIS DEL VALLE V	ILLALOBOZ RODRIGUEZ				
		Name of Person				
	KARELIS DEL VALLE V	ILLALOBOZ RODRIGUEZ				
	 -	Firm/Company				
	4341 GARDENSTON CO	URT				
		Address				
	KISSIMMEE FL 34746-60	016				
	karelis 1411@gmail.com	City/State and Zip Code				
		to be used for future annual report notif	rication)			
	concerning this matter, please c VILLALOBOZ RODRIGUEZ					
Name o	of Person	at () Area Code Daytime	: Telephone Number			
Enclosed is a check for the	he following amount:					
■ \$25.00 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 Addres	55:	Street Address:				

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

TO:

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

(Name of the Limited Liability Company as it now (A Florida Limited Liability Com	appears on our records.) pany)	•
The Articles of Organization for this Limited Liability Company were filed of Clorida document number	on and a	issignec
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liability compa	any here:	
MERICAN RACKS TRANSPORT LLC		
he new name must be distinguishable and contain the words "Limited Liability Company,	"the designation "LLC" or the abbreviation	L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	202 S-5-	
		2
	3 3	

nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
	<u> </u>	
	₩ *	
. If amending the registered agent and/or registered office address on gent and/or the new registered office address here:	our records, <u>enter the name of the n</u>	ew reg
Name of New Devices and Assess		
Name of New Registered Agent:		
New Registered Office Address:		
Ent	er Florida street address	
<u></u>	Florida	
City	Zip Cod	e

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
			□ Add
			□ Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□ Remove
			□Change
			□Add
			□ Remove
			□Change

Mailing Address 1170 GREENSKEEP DR STE	G KISSIMMEE	FL 34741				_
	G KISSIMMEE	FL 34741				
1170 GREENSKEEP DR STE	G KISSIMMEE	FL 34741			 	
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		1/23/2024				
tive date, if other than the effective date is listed, the date must If the date inserted in this bloment's effective date on the De	e specific and can k does not meet	the applicable s			iling.) Pursuant to	
ord specifies a delayed effective filed.	date, but not an e	effective time, a	t 12:01 a.m. on the	earlier of: (b)	The 90th day a	fter the
1 01/23		2024				
	/ Jefsef					
	gnature of 4 mem	ber or authorized	representative of a r	nember		