## K22000101926

(Re	questor's Name)	
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(Cit	y/State/Zip/Phon	e #)
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(Do	cument Number)	<del></del>
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SECRETARY OF STATEMS DIVISION OF CORPORATIONS

T. MATTHEWS

## **COVER LETTER**

Division of Corporations		
SUBJECT: BIG LAN Trucking Name of I	ng a Transportation, LLC	
The enclosed Articles of Amendment and fee(s) are s	submitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
,	On F. Gilbert  Name of Person  Trucking - Transportation  Firm/Company	
<u>14143 SE</u>	Address	
Summ	OER FLID. FL 34491 City/State and Zip Code	
	s: (to be used for future annual report notification)	
For further information concerning this matter, please	e call:	
Britany Seaus-Gilbert Name of Person	at ( <u>352</u> ) <u>207-7847</u> Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:		
■ \$25.00 Filing Fee Solution Status S25.00 Filing Fee Solution Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee.  Certified Copy tadditional copy is enclosed)  ☐ \$60.00 Filing Fee.  Certificate of Status & Certified Copy tadditional copy is enclosed)	
Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations	

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

ARTICLES OF ORGANIZATION SLCRE TARY OF STATIONS
OF DIVISION OF CORPORATIONS Big Lane Trucking of Transportation: UC

(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 Florida document number <u>L22000101924</u> .	were filed on FCO 28T, 7022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity 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 a agent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	Enter Florida street address
	121 ' 1

## 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

Zip Code

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
CED	Breyon Gilbert	14143 SE U3rd Ferr	BAdd
		Summer field, FL 34491	□Remove
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(If an effe Note: I	te date, if other than the date of filing:
ord is file	
Dated _	April 112 2022.
	April 11 3 . 2022.  Buttury Stalla Hubblet  Signifian of a member or authorized representative of a member
	Brittany Seaus-Gilbert Typed or printed name of signee

Filing Fee: \$25.00