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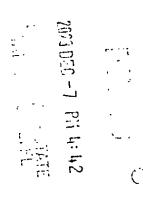
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COVER LETTER

Division of Corpo	rations			
SUBJECT:	TCK D.O.G Name of Lin	Trucking of A	Lids	
The enclosed Articles of An	mendment and fee(s) are sub	omitted for filing.		
Please return all correspond	ence concerning this matter	to the following:		
	Big Do	Name of Person Grucking Firm Company Shle Stone Address Jar FL 3 City/State and Zip Code by 1 Forever to be used for future annual report notifi	ive 2514 PgmAil, Com	
For further information conc	erning this matter, please c	ail:		
Kane of Pe	Sm. H	at (<u>850</u>) <u>53</u> Area Code Daytime	O- 3307 Telephone Number	
Enclosed is a check for the for the form of the form o		S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	77
Mailing Address:		Street Address:		

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

TO:

Registration Section

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

Black Dob Truck (Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) (ability Company)
The Articles of Organization for this Limited Liability Company value of Dirac Labellity Company v	were filed on $\frac{3/16/2022}{36}$ and assigned $\frac{3}{14}$ $\frac{4}{9}$ $\frac{3}{3}$ $\frac{3}{3}$ $\frac{3}{2}$ $\frac{3}{5}$
A. If amending name, enter the new name of the limited liabil	niv company nere:
The new name must be distinguishable and contain the words "Limited Liabilit Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	y Company," the designation "LLC" or the abbreviation "L.L.C." 1037 (dbks) or Drive Pensacola Florida 32514
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2172 W nine Mile Rd # 262 Persacola, FL 32534
B. If amending the registered agent and/or registered office ac 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:	
New Registered Office Address:	Enter Florida street address Florida

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.

New Registered Agent's Signature, if changing Registered Agent:

Cuv

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	
ANIDD	المحشيم والمحجة	٦.

AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Change
			🖸 Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			☐Remove ☐Change
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			☐ Remove
			□Change
			□Add
			□Remove
			Change

). 11 amei	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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(If an effec	re date, if other than the date of filing:	as the
	nt's effective date on the Department of State's records.	1.
the record cord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after it	he
Dated _	December 4 2023	
	Revin W. Suith	
	December 4 2023. Which W. Swith Signature of a member or authorized representative of a member Kevin W. Smith Typed or minted name of signer	