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| Special Instructions to Filing Officer: | |
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COVER LETTER

| TO: Registration Se Division of Cor | | | · · · · · |
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| SUBJECT: | GO RENTALS & MORE, LLO | | |
| | Name of Lim | ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ndence concerning this matter | to the following: | |
| | JENIFER L MORRIS | | 2023 HAR 30 PH 2: 20 |
| | | Name of Person | |
| | CHAPMAN & MORRIS | ACCOUNTING, PA | 33 7 |
| | | Firm/Company | PA |
| | 150 DAL HALL BLVD | | 20 22 |
| | | Address | |
| | LAKE PLACID, FL 33852 | 2 | |
| | | City/State and Zip Code | · · · · · · · · · · · · · · · · · · · |
| | JENIFER.MORRIS@YAH | | . |
| | E-mail address: (| to be used for future annual report no | tification) |
| For further information c | oncerning this matter, please c | all: | |
| JENIFER L. MORRIS | | 863 465-1918 | |
| Name o | f Person | | me 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 Address | | Street Address: | ection |
| Registration ! Division of C | | Registration S Division of Co | |
| P.O. Box 632 | 27 | The Centre of | Tallahassee |
| Tallahassee, | FL 32314 | 2415 N. Monr | oe Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J & R CARGO RENTALS & MORE, LLC (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 were filed on $\frac{03/31/2022}{1}$ and assigned Florida document number L22000155584 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: MAXX CARGO SEBRING, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation Enter new principal offices address, if applicable: 70 (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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida _

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 Changing Registered Agent, Signature of New Registered Agent

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 |
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| fective date, if other t | han the date of t | 6ling: 4/1/2023 | | | _ (optional | ` | |
| n effective date is listed, the ote: If the date inserted | e date must be specif | ic and cannot be pr | ior to date of filing | g or more than 90 | days after tiling | z.) Pursu | ant to 605.00 |
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| ted MARCH 24 | | 2023 | | | | | |
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Filing Fee: \$25.00