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COVER LETTER

Division of Corp			
SUBJECT: ROI	1 Out Haulin	ng And Junk Re	moval LLC
	Name of Limi	ted Liability Company	
The enclosed Articles of A	mendment and fee(s) are subr	mitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
•	Ç	_	
	Malcoln	M. Davi 5 Name of Person	
		Name of Person	
	Rollout Hau	Lling And Junk K	emoval, LLC
	3912 Na	milton key Address	<u>.</u>
	West Palm	Beach, FL 334 City/State and Zip Code of 1971@ yahoo. o be used for future animal report notifi	:11
	Malcolm E-mail address: (1	nd 1971@ yahoo.	COM cation)
For further information co	ncerning this matter, please ca		
Malcoli	n M. Davis	at (561) 315-	7009
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	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)

TO:

Registration Section

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

Roll Out Hauling and Junk Removal 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 Compa	ny were filed on $\mathcal M$	ay 9, 2022 a	nd assigned
Florida document number <u>L 22000217514</u>		O	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	LLC		
The new name must be distinguishable and contain the words "Limited Lia			
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
(Principal office address MOST BE A STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	TALLAH)	2022 AUG 22
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our reco	ords, enter the name of A	20
Name of New Registered Agent: N/1	4		
New Registered Office Address:	Enter Florida	a street address	
		, Florida	
	City	Zip	Code
New Registered Agent's Signature, if changing Registered Agent	<u>nt:</u>		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a	ete performance of m	y duties, and I am familie	ar with and

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.

ル/A
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
	NIA		□Add
			□Remove
			☐ Change
			□Add
			□Remove
			
			□ Remove
			□Change
			□Add
			Remove
			□ Change
			Remove
			□ Change
		 	□Remove
			□Change

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	FL		J
			
			
			
Effective date, if other than the date of filing:	fter filing.) Pun		
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ed is filed.	(b) The 90t	th day a	fter the
Dated August 16 2022.			
Signature of a member or authorized representative of a member			