K22 000234401

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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FILED

2022 JUN 14 AM II: 10

SECRETATION OF STATE

A. BUTLER SEP - 1 2022

COVER LETTER

| TO: | Registration Se Division of Co | | | |
|-----------------|-----------------------------------|--|---|---|
| SUBJEC | | TRANSPORTING LLC | | |
| SUBJEC | , <u></u> | Name of Lin | nited Liability Company | |
| The encl | osed Articles of | Amendment and fee(s) are sul | omitted for filing. | |
| Please re | eturn all correspo | ondence concerning this matter | to the following: | |
| | | CAROLD D BUREY JR | | |
| | | | Name of Person | |
| | | BUREY'S TRANSPORTI | NG LLC | |
| | | - | Firm/Company | |
| | | 745 MALIBU BAY DR. # | 104 | |
| | | | Address | |
| | | WEST PALM BEACH, F | L., 33401 | |
| | | | City/State and Zip Code | |
| | | bureytransporting22@gmai | | |
| Dan Gamb | | | to be used for future annual report noti | fication) |
| roi mum | er miormanon c | oncerning this matter, please c | au; | |
| CAROLI | D D BUREY JR | | 561 591-7968 | |
| | Name o | f Person | at () Area Code Daytim | e Telephone Number |
| Enclosed | is a check for th | ne following amount: | | |
| ■ \$25.0 | 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 Registration S | | <u>Street Address:</u> Registration Sec | ction |
| | Division of C | | Division of Cor | |

P.O. Box 6327 Tallahassee, FL 32314

TO:

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED

BUREY'S TRANSPORTING LLC

2022 JUN 14 AM 11: 13

| (Name of the Limited I (A I | jability Company as it now appears forida Limited Liability Company) | son our records.) | STATE |
|---|---|--|---------------------------------------|
| The Articles of Organization for this Limited Liabil | lity Company were filed on 05/ | 19/2022 | and assigned |
| Florida document number L22000234401 | | | and assigned |
| This amendment is submitted to amend the following | | | |
| A. If amending name, enter the new name of the | e limited liability company her | <u>re</u> : | |
| The new name must be distinguishable and contain the words | "Limited Liability Company," the de | signation "LLC" or the abl | breviation "L.L.C." |
| Enter new principal offices address, if applicable | 2: | | |
| (Principal office address MUST BE A STREET A | DDRESS) | | |
| | | | |
| | | | |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BOY | <u>v</u> | | |
| B. If amending the registered agent and/or regis agent and/or the new registered office address he Name of New Registered Agent: | tered office address on our rec <u>ere</u> : | cords, <u>enter the name</u> | e of the new registere |
| - · · · - - | | | |
| New Registered Office Address: | Enter Floric | da street address | |
| | | . Florida | |
| | | , Florida | Zip Code |
| New Registered Agent's Signature, if changing Regis | tered Agent: | | |
| I hereby accept the appointment as registered ag provisions of all statutes relative to the proper a accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this char | nd complete performance of n ed agent as provided for in Ch stered office address, I hereby | ny duties, and 1 am fa hapter 605, F.S. Or. i | miliar with and I this document is |
| | If Changing Registered Agec | nt, Signature of New Regi | stered 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 |
|--------------|-------------------|-----------------------------|----------------|
| AMBR | CAROLD D BUREY JR | 745 MALIBU BAY DRIVE #104 | ≣ Add |
| | | WEST PALM BEACH, FL., 33401 | |
| | | | []Change |
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| ffective date, if other than the date of filing: | _ | |
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Filing Fee: \$25.00