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(Requestor's Name)
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(Document Number)
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SECRETARY OF STATE TALLAHASSEE, FL

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COVER LETTER

	gistration Section vision of Corpor					
SUBJECT:	<u> </u>	Name of Limited	C d Liability Company		·	
		endment and fee(s) are submit	-			
Please return	all corresponde	nce concerning this matter to	the following:			
		Clarissa Flemi	Name of Person	 		
		Rumor Truck	Firm/Company			
			Firm/Company			
		7124 Haskell	5+	•		
		7124 Haskell	Address		s 26	
		Part Charlotte	FL 33951)22 OI ECR TAL	= ** Ti
		(City/State and Zip Code		CT 2	(F1.8 [2015
	_	Sumer trucking &	FL 33 95 Z City/State and Zip Code Sthail. Com be used for future annual report notif	ionion\	RY T	13
For further i		erning this matter, please call:	e used for future annual report notif	ication)	2022 OCT 25 PH 1:30 SECRETARY OF STATE TALLAHASSEE. FL	ξ.
Claris	Name of Pe	nins rsgn	at (<u>740</u>) <u>683</u> - Area Code Daytime	2178 Telephone Number		
Enclosed is	a check for the f	ollowing amount:				
(X \$25.00)	00 Filing Fee Solution Status S55.00 Filing Fee Solution Score Status S60.00 Filing Fee, Certificate of Status Score (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status Score (additional copy is enclosed)					
	iling Address: gistration Sec	tion	Street Address: Registration Sec	etion		

P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Talianassee
2415 N. Monroe Street, Suite 810
Talianassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rymor Trucking	
(Name of the Limited Liability	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co	ompany were filed on $\frac{8/15/2022}{}$ and assigned
Florida document number <u>L22000357/83</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ed liability company here:
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRE	ESS)
	722
	RET CT
Enter new mailing address, if applicable:	AR 25
(Mailing address MAY BE A POST OFFICE BOX)	SS 0 P 1
	30 PEL
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the name of the new regis
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	City Zip Code

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 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>	Name	Address	Type of Action
MG-R	Kody Hittle	2124 Huskell St Path Charlotte	FL QAdd
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Effectiv	e date, if other than the date of filing: October 1/2 2022 (options	ıl)		e 0207
f an effec Note: 1	ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing the date inserted in this block does not meet the applicable statutory filing requirements, this date	te will n	ot be lis	ted as
docume	t's effective date on the Department of State's records.			
record d 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 aft	er the
a is inc	•			
Dated	October 11th , 2022			
	100			
	Signature of a member or authorized representative of a member			
	Signature of a member of authorized representative of a member			