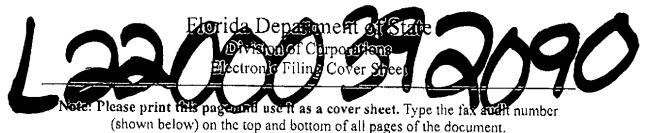
12/22/22, 3:00 PM

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALLSTATE CORPORATE SERVICES CORP

Account Number : I2004000031 Phone : (800)906-9220 Fax Number : (800)906-9880

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please, **

Email	Address:		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN \mathbb{Q}^2 FRANCIS ELITE TRUCKING LLC

Certificate of Status	1
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Estimated Charge	\$30.00

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Corporate Filing Menu

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(((H22000430700 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FRANCIS ELITE TRUCKING 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 09/07/2022 Florida document number L22000392090	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
FRANCIS ELITE ENTERPRISE, LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbrevial	tion "L.L.C."
Enter new principal offices address, if applicable:	
(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 agent and/or the new registered office address here:	ie new registerec
Name of New Registered Agent:	
New Registered Office Address:	2598
Enter Florida street address	
, Florida _ 😘	20 =
New Registered Agent's Signature, if changing Registered Agent:	Code -
	<u>-Æ</u>

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 familiate 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.

(((H22000430700 3)))
If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

Title	<u>Name</u>	Addison	
100	13ante	Address	Type of Action
			□Add
			□Remove
			□Change
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			☐ Change
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			□Change
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fective date, if other than the da neffective date is listed, the date must be ote: If the date inserted in this block cument's effective date on the Depa	specific and cannot be does not meet the a	prior to date of filin pplicable statutor	g or more than 90 days a	ptional) effer filing.) Pursuant to this date will not be	605.020 listed a:
ecord specifies a delayed effective da is filed.	ite, but not an effect	ive time, at 12:01	a.m. on the earlier of	(b) The 90th day a	ifte; the
DECEMBER 22	, 2022	·			
/S/ KNOLI	YST, LEV				