Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220003468673)))



To:	Division of Corporations Fav Number (850)617-6383
	Division of Corporations Fax Number : (850)617-6383
From:	
	Account Name : TRUCKING PERMITS AND MORE LLC
	Account Number: IZ0140000047 Phone: (813)774-4726
	Fax Number : (813)877-2186

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN URBANMASS GROUP LLC

Certificate of Status	0
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Help

K. SALY

Registration Section

TO:

COVER LETTER

18132001059

Division of Co	orpovations			
	AASS GROUP LLC			
DBJECT:Name of Limited Liability Company				
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresi	ondence concerning this matter	to the following		
	sometimes and manual			
	IGLESIAS VARONA, WI	LLIAM		
		Name of Person		
		Firm/Company		
	5226 MAPLE HILL DR			
	Address			
	TEMPLE TERRACE, FL 33617			
		Chy/State and Zip Code		
	1/ mail address: 1	to be used for future annual report notif	is stron)	
For further information	concerning this matter, please c	·	scarror,	
MYRIAM VARGAS		813 77444726 at ()		
Name	of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for	the following amount:			
■ \$25,00 Filing Fee	Ul \$30 00 Filing Fee & Certificate of Status	El \$55 00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of To 2415 N. Monroe Tallahassee, FL	porations allahassee : Street, Suite 810	

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



URBANMASS GROUP LLC		**()/
(Name of the Limited Liability Comp. (A Florida Limited	ury as it now appears on our reco Liability Company)	<u>rds.</u> 1
The Articles of Organization for this Limited Liability Company	were filed on 10/3/22	and assigned
Florida document number L22000431806		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and cuntain the words. Tannted Laubi	hty Company," the designation "LI	C" or the abbreviation "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 agent and/or the new registered office address here:	address on our records, <u>ente</u>	er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florido street saldr	UNY
	. 1	Florida
	Unv	Zio 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 hability company has been notified in writing of this change.

From: Trucking Permits And More LLC

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

2022-10-10 14:21:45 GMT

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SEEBARAN, ABRAHAM A	5226 MAPLE HILL DR	■ Add
		TEMPLE TERRACE, FL 33617	URemove
			©Change
MGR	GLASS, TYRELL B	5226 MAPLE HILL DR	Add
		TEMPLE TERRACE, FL 33617	□ Remove
		-	□ Change
			🖸 Add
			Change OCT LO PH 4: 12
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To:

2022-10-10 14:21:45 GMT

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E. Effective date, if other than the date from effective date is listed, the date must Note: If the date inserted in this blood document's effective date to the Department.	be specific and cannot be prior to date of filing or mor ck does not meet the applicable statutory filing	(optional) re than 90 days after filing.) Pursuant to 605,0207 (30b) requirements, this date will not be listed as the
If the record specifies a delayed effective record is filed	date, but not an effective time, at 12.01 a.m. or	the earlier of (b). The 90th day after the
Dated OCTOBER 10	. 2022	
William Izlesias	s Varona Signature of a member or authorized representative o	
s	ignature of a member or authorized representative o	f a member
WILLIAM IGLESIAS V		
	Typed or printed name of signee	