## Florida Department of State Division of Corporations Frections Filing Coversites

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

\*\*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 GILL CASTILLO TRUCKING LLC

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NOV 21 2022 K. Brumbley

## ARTICLES OF AMENDMENT. TO ARTICLES OF ORGANIZATION OF

Gill Castillo Trucking LLC	_	
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number <u>L22000480670</u>		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	pility Company," the designation "LLC" or the a	bbreviation "L 1C."
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:  Name of New Registered Agent:	e address on our records, enter the nar	ne of the new registered
	Harding Alberta Market Annual Harding	<u> </u>
New Registered Office Address:	Enter Florida street address	AAND PH
	Cuy	Zip Gode
New Registered Agent's Signature, if changing Registered Agen	t:	<u> </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 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>	<u>Name</u>	Address	Type of Action
MGR	N/A, N/A	7901 4TH ST N STE 300	
		ST. PETERSBURG, FL 33702	⊠Remove
			□Change
MGR Gill German	Gill German Castillo	12220 SW 251ST TERRACE	<b>X</b> IAdd
		HOMESTEAD, FL 33032	□Remove
			□Change
			□Add
			Remove
		- III	Change
			□Add
			Remove
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Offect	ve date, if other than the date of filing:
Note:	of the date is listed, the date must be specific and cannot be prior to date of dring of indice man by days after range). If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
reco d is f	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	November 18 2022
	R: Lun Park
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00