L22000505452

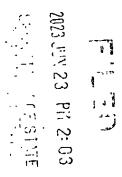
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Y. SCOTT AUG - 5 2023

COVER LETTER

TO: Registration Section Division of Corpor			
SUBJECT: NOY		ansport Lines ited Liability Company	
The enclosed Articles of Am	endment and fee(s) are sub	omitted for filing.	
Please return all corresponde	nce concerning this matter	to the following:	
		Y Cunning harm	
	Sharp Bladez	Lawn Seince and I	Pressure Washing, LLC
	9424 Bayn	neadows Rd, Ste	. 250 THE JUN 23
		City/State and Zip Code	
<u>.</u>		Spe gmail com	ication)
For further information conc	erning this matter, please c	all:	
Brittary Cu	nningham	at (904) 215 - Area Code Daytime	2398 Telephone Number
Enclosed is a check for the fo	ollowing amount:		
\$25.00 Filing Fee	330.00 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 Address: Registration Sec		Street Address: Registration Sec	
Division of Corp	orations	Division of Corp	
P.O. Box 6327 Tallahassee, FL	32314	The Centre of Ta 2415 N. Monroe	allahassee Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Northpastern Transpor	any as it now appears on our records.)
(A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number $\underline{L2200505452}$.	were filed on November 30, 2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liah</u>	pility company here:
Sharp Bladez La The new name must be distinguishable and contain the words "Limited Liabi	Wn Scruce and Pressure Washing, LL dility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	9424 Baymeadows Rd
(Principal office address MUST BE A STREET ADDRESS)	Ste 250 Jacksonville, FL 32256
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, enter the name of the new registered
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
MGR	Brittany Cunninghum		□ Add
			□Remove
		<u>·</u>	⊠ Change
			□Add
			□Remove
			22 Change ∴ C 23
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			□Add
			□Change
			□Remove
			□Add
			□Remove
			□Change

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an effective date is ote: If the date	f other than the data is listed, the date must be inserted in this block live date on the Depar	specific and o does not me	annot be prio	cable statut			days after			
ecord specifies is filed.	a delayed effective da	te, but not a	n effective t	ime, at 12:	01 a.m. on	the earl	ier of: (b) The	290th d	lay after the
ned <u>. Jiure</u>	21	 .	2023	<u> </u>						
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	Sign	nature of 3 m	ember or auth	orized repre	sentative of	a membe	tr			_