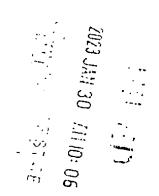
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A. EUTLER
JAN 3 0 2023

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:		RANSPORTATION & LOGIS	STICS LLC	
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed	d Articles of a	Amendment and fee(s) are subt	mitted for filing.	
Please returr	all correspor	ndence concerning this matter t	to the following:	
		ADRIAN GRAHAM		
			Name of Person	
JOYCE'S TRANSPORT.			TION & LOGISTICS LLC	
			Firm/Company	
		1221 NW 46TH AVE		<u>.</u>
			Address	
		LAUDERHILL FL 33313		
			City/State and Zip Code	
		AMGRAHAM2888@YAH		
		E-mail address: (t	to be used for future annual report no	etification)
For further i	nformation co	oncerning this matter, please ca	itt:	
adrian G	RAHAM		954 588-8627 at ()	
	Name of	Person	Area Code Dayti	me Telephone Number
Enclosed is	a check for th	e following amount:		
□ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)
Re Di P.0	ailing Addres egistration S vision of C O. Box 632 Illahassec, I	Section orporations 7	Street Address: Registration S Division of Co The Centre of 2415 N. Mont	orporations Tallahassee roe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOYCE'S TRANSPORTATION & LOGISTICS LLC

company has been notified in writing of this change.

(Name of the Limited Liability Company as it now appears on four records.) 10: 06
(A Florida Limited Liability Company)

The Articles of Organization for this Limited L	iability Compa	ny were filed or	01/11/2023	OF STATE (FF.)	and assigned
Florida document number L23000024473	staothty Compa	ny were med on	· 		
Florida document number	·				
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited li	ability compan	y here:		
JOYCE'S TRANSPORTATION & TRUCKING					
The new name must be distinguishable and contain the	words "Limited Lis	ability Company,"	the designation "	LLC" or the abbro	eviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A			
(Principal office address MUST BE A STREA	<u>ET ADDRESS)</u>				
		N/A			
Enter new mailing address, if applicable:		17/1			
(Mailing address MAY BE A POST OFFICE	E BOX)				
B. If amending the registered agent and/or	registered offic	ce address on o	ur records, <u>en</u>	ter the name	of the new registers
agent and/or the new registered office addre	ess here:				ı
N. CN. D. '. I.A.	N/A				
Name of New Registered Agent:	<u> </u>				\
New Registered Office Address:	N/A ————				
	Enter Florida street address				
		, Florida			Zip Code
		City			Zip Code
New Registered Agent's Signature, if changing	Registered Age	nt:			
I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg- being filed to merely reflect a change in the	per and compl zistered agent c	ete performanc us provided for	e of my dutie. in Chapter 6	s, and I am fai 05, F.S. Or, if	miliar with and this document is

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			☐Add
			Remove
			□Remove
			□Change
			□ Add
			□Change
		□Add	
			□Remove
			□Change
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Note: If	e date, if other than the tive date is listed, the date must the date inserted in this bloat's effective date on the De	ock does not mee	t the applicable st	of filing or more than atutory filing requir	(optional) 90 days after filing.) Purstements, this date will	uant to 605.0207 anot be listed as
e record s rd is filed	specifies a delayed effective l.	e date, but not an	effective time, at	12:01 a.m. on the e	earlier of: (b) The 90t	h day after the
Dated <u></u>	-30-23 John		·			
	Ush	XI				
						
	Adrian	Signature of a mer	mber or authorized i	epresentative of a me	mber	