Division of Corporations lectoric Filing Cover She

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To:

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 **ZK TRUCKING LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZK 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 02/01/23 Florida document number L23000046808 This amendment is submitted to amend the following:		and assig	gned
This affendment is submitted to affend the following.			
A. If amending name, enter the new name of the limited liability company here:			
LAK International LLC			
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the	abbrevia	ation "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 na agent and/or the new registered office address here:	me of		
		2023 FF-1	!
Name of New Registered Agent:		מ) ניב ניב	
New Registered Office Address:		- 5	··
Enter Florida street address	-	ص_	''''
, Florida	<u> </u>	- C-T:	
	= -21	p Coae	
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 a provisions of all statutes relative to the proper and complete performance of my duties, and I an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Obeing filed to merely reflect a change in the registered office address, I hereby confirm that the l	i famil r, if thi	iar with is docun	and nent is

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 ad or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			
			□Remove
			□Change
			□Add
			□Remove
			☐Change
			□Add
			□Remove
			□Change
			□ Add
		- International Control of Contro	□Remove
			☐ Change
Valedonia valedo (VIII - PI-			□Add
			Петоve
		- <u></u>	□Change
			□Add
			□Remove
			□Change

. If amending any other inforn	iation, enter change(s	s) here: <i>(Attach ac</i>	lditional sheets, if ne	cessary.)
		111111111111111111111111111111111111111		
			11-21-21-21	···
			<u>-</u> .	
3-1-12-13-13-13-13-13-13-13-13-13-13-13-13-13-			· <u></u>	
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Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	block does not meet the	applicable statutory	or more than 90 days after filing requirements, the	ional) r filing.) Pursuant to 605.02 is date will not be listed a
e record specifies a delayed effect rd is filed.	ive date, but not an effec	ctive time, at 12:01 a	.m. on the earlier of: (b) The 90th day after th
Dated February 7		3		
	NW	SWATI		
***************************************	Signature of a member of	or authorized represent	ative of a member	
		Smith		
	Tuneda	or printed name of sign	م مر م مر	

Filing Fee: \$25.00