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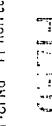


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SECTION OF STATE



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Tam Jam Transport LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Tammy May Mann Name of Person Tam Jam Transport LLC Firm/Company	
1834 Candlewood Drive	
Marchel FL 3 3256.6 City/State and Zip Code tammy @ tamjam transport. Com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Tammy Naumann at 314 853-6866 (2) Name of Person at 314 S53-6866 (2) Area Code Daytime Telephone Number	2023 HOV
Enclosed is a check for the following amount:	
S25.00 Filing Fee S30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)	2

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF Tan Jan Transport

(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	<mark>/ as it now appears on our (</mark> ability Company)	records.)
The Articles of Organization for this Limited Liability Company w Florida document number	vere filed on 22	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation	"L1.C" or the abbreviation "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)		20.
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	dress on our records, g	
		PH IZ
Name of New Registered Agent:		77 · 5
New Registered Office Address:		111
	Enter Florida street	uddress
		_, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
' hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as pro-	erformance of my duti	es, and I am familiar with and

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 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 added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u> Litte</u>	Name	Address	1 ype of Action
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an effec Note: If	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605, the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be distent's effective date on the Department of State's records.
record d is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after i.
Dated _	Movember 7th 2023.
Dated _	Movember 7th. 2023. Lamy Jaumann Agnature of a member or authorized representative of a member
Dated _	