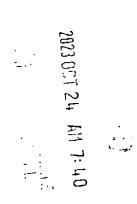
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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			



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Office Use Only

Ch 11/2/2023

COVER LETTER

SUBJECT: <u>REHOB</u>	OTH TRUCKING SERV	ICES, LLC ited Liability Company	
	Nane of Em	med Gaomey Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filling.	
Please return all corresp	ondence concerning this matter	to the following:	
	Corpor	ate Maintenance Le	ad
	-	Name of Person	
	Prod	essing Department	
		Firm/Company	
	1450 Vassar St		
		Address	
		Reno, NV 89502	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information c	concerning this matter, please c	all:	
Process	sing Department	at (800) 638-2320	
Name o	of Person	Area Code Daytime	: Telephone Number
inclosed is a check for t	he following amount:		
团 \$25.00 Filing Fee	☐ \$30.00 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)
	ING ADDRESS:	STREET/COURT	

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

Registration Section
Division of Corporations

· TO:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



IMPORTANT NOTICE



PLEASE SEND ALL DOCUMENTS –
APPROVED OR REJECTED TO THE ADDRESS
BELOW.

INC AUTHORITY ATTN: CORPORATE MAINTENANCE LEAD

1450 VASSAR ST RENO, NV 89502

OR

RETURNDOCS@INCAUTHORITY.COM

TO: PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING: Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM: Inc Authority, LLC

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE: Tuesday, October 17, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

Articles of Amendment

For: REHOBOTH TRUCKING SERVICES, LLC

We have included payment in the amount of \$25.00 for the following fees:

• Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 OCT 24 AM 7:40

REHOBOTH TRUCKING SERVICES, 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 02/17/23 and assigned Florida document number L23000086840 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 Changing Registered Agent, Signature of New Registered Agent

, Florida

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	Math R Benjamin	4052 Nw 62Nd Ct	☑ Add
		Coconut Creek, FL 33073	□ Remove
			Change
			☐ Add
		-	Remove
			Change
			D Add
			C Remove
			☐ Change
			Add
			☐ Remove
			Change
			☐ Remove
			☐ Change
			□ Add
			Remove
			☐ Change

). If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
-	
-	
-	
	
	ΝΙ/Λ
Note: If the	ate, if other than the date of filing: N/A (optional) 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 605.0207 (3)(i) date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
the record) The 90th	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: h day after the record is filed.
Dated	2dober 6 . 2023
_	Signature of a member or authorized representative of a member
	Michel Ange Odeville
-	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00