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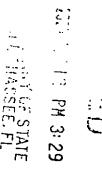
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Office Use Only



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OG/12/21

## **COVER LETTER**

Division of Corpo	rations			
SUBJECT: ARWM	THE CLOCK E	EXPRESS TRUCKING ited Liability Company	<u>G:MORE</u> ,	LLC
The enclosed Articles of Ar	nendment and fee(s) are sub	mitted for filing.		
Please return all correspond	ence concerning this matter	to the following:		
	David	Hayes Name of Person		
		Firm/Company		
	480 W. 3541 Riviera Be	Address  Address  City/State and Zip Code	All Allassee.	
	E-mail address: (	to be used for future annual report notific	zation) FL	FH 3: 29
For further information con	cerning this matter, please ca	all:	L.	9
David V Name of P	Catyles	at ( <u>SQ</u> ) <u>425</u> Area Code Daytime	-3024 Telephone Number	
Enclosed is a check for the	following amount:			
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
Mailing Address:		Street Address:		

TO:

Registration Section

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

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

Avond the clock express tyucking 3 more cuc (Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited Liability Company Florida document number <u>L 2300 0126932</u>	were filed on $3/13/2023$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabile Round The Clock S.  The new name must be distinguishable and contain the words "Limited Liability Inches the contain the words".	ervices, 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)	480 LD. 35th Street Riviera Bch, FL, 33404
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address Florida Street PH 3: 29
<del></del>	City Zup Code
Nany Danietorad Agant's Signature, if changing Danietorad Agant.	

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>	<u>Name</u>	Address	Type of Action
MAR	Constance N. Tabb	346 W. 15th Street	🗀 Add
		Riviera Brh. Fe, 33404	[ <b>T/</b> Remove
			Change
MGR	David C. Hayes	480 W. 35th Street	⊠Add
	V	Riviera Beach, FL, 33404	<u></u> □Remove
			T Change
			□Add
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			□Change
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		E.FL STATE	သ ြင်hange 29
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ctive date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filir		
If the date inserted in this block does not meet the applicable statutor iment's effective date on the Department of State's records.	y filing requirements, this date	will not be listed
ord specifies a delayed effective date, but not an effective time, at 12:01 filed.	a.m. on the earlier of; (b) The	e 90th day after th
1 Tung 5th 2001		
1 June 5+11, 2024		