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PICK-UP	WAIT	MAIL
<del></del>	Business Entity Name)	
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Certified Copies	Certificates of S	Status
Special Instructions to F	Sling Officer:	
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Office Use Only

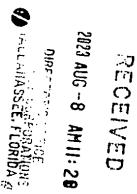


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SECRETARY OF STATE

FILED

08/08/23--01001--015 \*\*25.00



## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration So Division of Cor			
	I TRANSPO	RTATION	
SUBJECT:	·	ited Liability Company	<del></del> -
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	General F	Sremso III	
	GF TRANS	POLTATION Firm/Company	
	1720 Vh	/ Bad G	
	Fort LAUDE	RDALE, FL 33	33//
	grantforen E-mail address: (1	City/State and Zip Code  19 9991/ To be used for future arrhual report notifi	. co M
For further information c	oncerning this matter, please ca		
General Name o	Foreman f Person	at ( <u>754</u> ) <u>557</u> Area Code Daytime	-1430 e Telephone Number
Enclosed is a check for the	ne following amount:		
\$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)
Mailing Addres Registration S		Street Address: Registration Sec	ction
Division of C	Corporations	Division of Cor	-
P.O. Box 632	. /	The Centre of T	ananassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VICAN TORMAN CONSPO (Name of the Limited Liability Compan (A Florida Limited Li	rtation
(A Florida Limited Li	ability Company)
The Articles of Organization for this Limited Liability Company v	were filed on $04/07/23$ and assigned
This amendment is submitted to amend the following:	SECRETAL TALL AUG
A. If amending name, enter the new name of the limited liabil	lity company here:
Grant Foreman Transportation The new name must be distinguishable and contain the words "Limited Liability	LLC.
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the purevia "L.L.C.
Enter new principal offices address, if applicable:	1720 NW 3RD CHE = 0
(Principal office address MUST BE A STREET ADDRESS)	For LAUDERDALE, III
	3331
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1720 NW 3RD CT FOCT LAUDERDAIL FL 33311
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent: Lenera	1 G. Forengo III
New Registered Office Address: 1720 A	IIU 385 CX Enter Florida street address
- to-+ 1	City Florida 3331   Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

1

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

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
MGR	General Foreman II	1720 NW 3eD 4	<b>59</b> 0Add
		Fort LAVORDALE, FC	□ Remove
		33311	□Change
			□Add
		<del></del>	□Remove
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Dated			·				
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	V -	Sign	ature of a memi	per or authorized re	presentative of	of a member	

Filing Fee: \$25.00