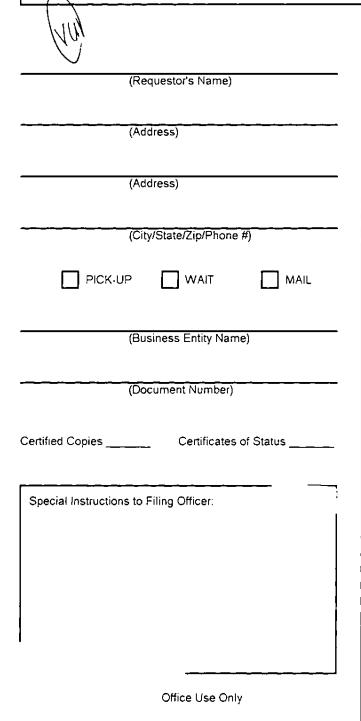
L23000228962





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COVER LETTER

TO: Registration S Division of Co									
CHD IPC'P.	REAKERS LOGISTICS, LLC								
Name of Limited Liability Company									
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.							
Please return all corresp	ondence concerning this matte	r to the following:							
	Yazan Alhalawani								
		Name of Person							
		Firm/Company							
	76 Edwin St N								
	D'	Address	<u> </u>						
	Ridgefield Park, NJ, 076								
	yazanzozo750@gmail.co	City/State and Zip Code							
		(to be used for future annual report no	tification)						
For further information	concerning this matter, please c	rall:							
Yazan Alhalawani		267 4621672							
Name o	of Person		ne Telephone Number						
Enclosed is a check for t	he following amount:								
■ \$25.00 Filing Fee	☐ \$30.00 Fiting 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		<u>Street Address:</u> Registration Se	ction						
Division of Corporations		Division of Cor	rporations						
P.O. Box 632 Tallahassee, I		The Centre of T	Tallahassee e Street, Suite 810						
		ATIJ IT. IVIUITU	e outer, suite of the						

Tallahassee, FL 32303

ARTICLES OF AMENDMENT OT ARTICLES OF ORGANIZATION

WALL BREAKERS LOGISTICS, L (Name of the Limite)	LC d Liability Compar	y as it now appe	ars on our records.)			
The Articles of Organization for this Limited Lia Florida document number L23000228962	A Florida Limited L ibility Company v	were filed on M	lay 09. 2023	i	and assi	gned
This amendment is submitted to amend the follo			ioro.			
A. If amending name, enter the new name of	the limited liabi	hty company i	iere.			
Haul Hunters, LLC		11.3	1 - i - wice "I I C" or I	the abbrevia	tion "L.L	.C."
The new name must be distinguishable and contain the wo		ity Company, the 2641 15th Av	enue , Saint Peters	sburg, FL	33 712	
Enter new principal offices address, if applicable:				7. [7]	<u></u>	
(Principal office address MUST BE A STREE)	T ADDRESS)	<u> </u>	<u>-</u>		~	****
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>	76 Edwin St.	Ridgefield Park, N.	0,07660 F 10 11	6 PM 3: 05	
B. If amending the registered agent and/or reagent and/or the new registered office address	egistered office a <u>s here</u> :	nddress on our	records, enter the	name of t	the new	registere
Name of New Registered Agent:		0.140-				
New Registered Office Address:	2641 15th Avenue , Saint Petersburg , FL , 33712 Enter Florida street address					
	Saint Petersbu	ırq	. Florida	33713		
		City	, 1101103	Zip	Code	
and the standard of the standa	tegistered Agent:	-				

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from or removed from our records:

MGR = Manager

Title Name MGR Yazan M Alhalawani 76 Edwin St N, Park Ridgefield, NJ, 07660	Type of Acti
	□ ∧dd
	□Remove
	Change
	□Remove
	□Change
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	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	AS SOON AS POSSIBLE
If an e Note:	tive date, if other than the date of filing:
ne reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ided.
)at c d	01/15/2024
	Signature of a member or unithorized representative of a member
	Signature of a member or unthorfzed representative of a member

Filing Fee: \$25.00