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SECULIA OF STATE



COVER LETTER

TO:

	ion Section of Corporations		
SUBJECT:	Anyway Trucking LLC		
30bat.c 1	Name of Li	mited Liability Company	
The enclosed Artic	les of Amendment and fee(s) are su	ibmitted for filing.	
Please return all co	rrespondence concerning this matte	er to the following:	
		lan Shchetinin	
	-	Name of Person	
		Firm/Company	
	16	950 N Bay Rd Apt 2404	
		Address	
	Sun	city/State and Zip Code	
	E-mail address:	rmes.yan@gmail.com	fication)
For further informa	tion concerning this matter, please	•	
Nadiy	a Demidovich	at (<u>904</u>) <u>990</u> 5050	
	ame of Person	Area Code Daytim	e Telephone Number
Enclosed is a check	for the following amount:		
□ \$25.00 Filing I	Fee S \$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 A		Street Address:	otion
-	tion Section of Corporations	Registration Sec Division of Cor	
P.O. Box	•	The Centre of T	
	see FL 32314		e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Trucking LLC	
lity Company as it now appears on our recorda Limited Liability Company)	rds.)
Company were filed on 06/12/2023	and assigned
·	
nited liability company here:	
mited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
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Enter Florida street addr	ess
	51 t.d
, I	Florida
	ity Company as it now appears on our recola Limited Liability Company) Company were filed on

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 our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
 			□Add
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an effective of the	te, if other than the data is listed, the date must be date inserted in this bloe affective date on the Dep	k does not mee	t the applicable e's records.	statutory ming requ	memens, this date	
fan effective (<u>Note:</u> If the locument's c	date is listed, the date must be date inserted in this bloe	k does not mee artment of State	e's records.			

Filing Fee: \$25.00