## L23 000 296672

(Re	questor's Name)	<u></u>
(Add	dress)	
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(City	y/State/Zip/Phoni	e #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nar	me)
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Certified Copies	Certificates	s of Status
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2024 MAR -4 AM II: 5 SECRETARY OF STATE

## **COVER LETTER**

TO: Registration So Division of Cor				
	OGISTIC LLC			
SUBJECT:	Name of Lin	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Skye Hallett			SECRETARY OF STATE
		Name of Person		型量工
	Fleetdrive 360 Inc			10000000000000000000000000000000000000
	<del> </del>	Firm/Company		70
	1640 Powers Ferry Rd, Bl	dg 3 Ste 200		WIII.
		Address		FINE OF
	Marietta, GA 30067			• • •
	filings@fleetdrive360.com	City/State and Zip Code		
	- ·	to be used for future annual report not	ification)	
For further information of	concerning this matter, please c	·		
Skye Hallett		470 598-1881		
Name o	of Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	he 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 Addres		Street Address:		
Registration 9 Division of C		Registration Se Division of Co		
P.O. Box 632		The Centre of	•	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	YIKES LOG	ISTIC LLC		
(Name of the Limited I	<b>Jability Compa</b> Florida Limited I	ny as it now appears on or liability Company)	ur records.)	<del></del>
The Articles of Organization for this Limited Liabi Florida document number 1.23000296672	lity Company	were filed on $\frac{06/20/20}{}$	23	and assigned
This amendment is submitted to amend the followi				s S
A. If amending name, enter the new name of th	<u>e limited liabi</u>	ility company here:		T !!
The new name must be distinguishable and contain the words	s "Limited Liabil	lity Company," the designat	ion "LLC" or the	abbreviation LLC.
Enter new principal offices address, if applicabl	e:	9808 Warm Stone St		100 E
• • •		Thonotosassa, FL 335	92	mo = 0
Enter new mailing address, if applicable:		9808 Warm Stone St		
nter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office ent and/or the new registered office address here:  Name of New Registered Agent:	<u>X)</u>	Thonotosassa, FL 335	92	
		nddress on our record	s. <u>enter the na</u>	me of the new registered
Name of New Registered Agent:				
New Registered Office Address:	9808 Warm Sto	-		
		Enter Florida stre	et ad <mark>áre</mark> ss	
_	Γhonotosassa		Florida _	3592
		City	_	Zip Code

## 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Sharon Bright	9808 Warm Stone St. Thonotosassa, FL 33592	<b>=</b> Add
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			□Change
		<u></u>	2024 Add TI
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Skye Hallett Signature of a member or authorized representative of a member						
Signature of a member or authorized representative of a member	is filed.	\ 2024				
	is filed.  February 15  ated					

Filing Fee: \$25.00