L23000362895

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SEPARTMENT OF STATE

A. PARISHANI NOV 0 4 2023

COVER LETTER

FO: Registration Section Division of Corporations SWIFT SHIP LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: BENJAMIN P KOONTZ Name of Person			•
	HIP LLC	č.	
SUBJECT:	Name of Lim	ited Liability Company	2023 C
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	CT 31
Please return all corres	pondence concerning this matter	to the following:	2023 OCT 30 PM 12: 4 SEPARTMENT OF STATE OVISION OF CORPORATION TALLAHASSEE, FLORIDA
	BENJAMIN P KOONTZ		7. 4.1 7.7.15 7.110 7.11
		Name of Person	
		Firm/Company	
	2971 BREEZY MEADOW	/ ROAD	
		Address	
	APOPKA, FL 32712		
		City/State and Zip Code to be used for future annual report notif	cation)
for further information	concerning this matter, please ca	ałl:	
3ENJAMIN P KOON		407 415-7973 at ()	
Name	of Person	Arca Code Daytime	Telephone Number
inclosed 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)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr Registration Division of P.O. Box 63 Tallahassec,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	oorations allahassee Street, Suite 810

ARTICLES OF AMENDMENT

SWIFT SHIP LLC

(<u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on our reco d Liability Company)	FLORAL NO.	
The Articles of Organization for this Limited Liability Compan	ny were filed on 08/02/2023	and assigned	
Florida document number 1.23000362895			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	ibility company here:		
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "L	.LC" or the abbreviation "L.L.C."	
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)			
B. If amending the registered agent and/or registered office	e address on our records, <u>ent</u>	er the name of the new register	
agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florida street address		
	, Florida		
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>		
I hereby accept the appointment as registered agent and ag	gree to act in this capacity. $I_{ m c}$	further agree to comply with ti	

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

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

AGR = Manager AMBR = Authorized Member

<u>`itle</u>	<u>Name</u>	<u>Address</u>	Type of Action
лGR	BENJAMIN P KOONTZ	2971 BREEZY MEADOW ROAD	≣ Add
		APOPKA. FL 32712	□Remove
			□ Change
			□ Add
			2023-0CT 301Change
			REPORT AND ADDRESS OF STREET
			□Remove
			□ Change
			□Add
			□Remove
			□Change
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		ATE	<u></u>
	be specific and cannot be prior to date of filin ock does not meet the applicable statutory		
he record specifies a delayed effective ord is filed.	e date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th of	lay after the
Dated October 2nd	Dr. Knt.		
	Signature of a member or authorized represer	ntative of a member	

P''' - P - 635 01