L23000539492

(Reque	estor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Docur	ment Number)	, <u>, , , , , , , , , , , , , , , , , , </u>
Certified Copies	Certificate	s of Status
Special Instructions to Filin	ng Officer:	

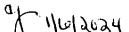




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COVER LETTER

TO: Registration Se Division of Cor			
******	amily Trucking L.L.C.		
SUBJECT:	Name of Limi	ited Liability Company	
		and the state of t	
	Amendment and fee(s) are sub-		
Please return all correspo	ndence concerning this matter	to the following:	
	Jonathan Taboada		
		Name of Person	
	ZenBusiness INC		
		Firm/Company	
	336 E. College Ave Suite I	301	
	 	Address	
	Tallahassee, FL 32301		
		City/State and Zip Code	
	fulfillment@zenbusiness.co		
	E-mail address: (to be used for future annual report not	tification)
For further information of	concerning this matter, please co	all:	
c/o ZenBusiness INC		844 493-6249 at ()	
Name o	of Person		ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration		Street Address: Registration S	ection
Division of C		Division of Co	orporations
P.O. Box 632 Tallahassee,		The Centre of 2415 N. Monro	Tallahassee oe Street, Suite 810
rananassee,	1 L J2J14	2417 IV. MIDHI	oc bucch build ord

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 070 18 7110: 37 Only The Family Trucking L.L.C. (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 12/12/2023 12/05/2023 and assigned Florida document number $\frac{1.23000539492}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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 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	Chassidy Chanza	12956 Mallory Circle Unit 207	□Add
		Orlando, F1. 32828	Remove
		US	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change

. Effective date, if other than to (If an effective date is listed, the date	the date of filing:	(optional) e of filing or more than 90 days after filing.) Pursuant to 605.020 statutory filing requirements, this date will not be listed as
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