Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

from:

Account Name : WISE TAX FIRM INC.

Account Number : 12021000018

Phone : (785)529-8891 Fax Number : (785)227-6631

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GLOBAL EXTREME ENTERPRISE LLC

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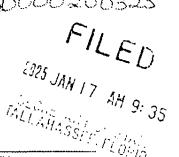
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



GLOBAL EXTREME ENTERPRISE LLC		1000
(Name of the Limited Liability Company sy it (A Florida Limited Liability	naw appears an our records.) Company)	Tioning.
The Articles of Organization for this Limited Liability Company were f	iled on 12/13/2023	and assigned
Porida document number 1.23000550799		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited hability co	mpany here:	
OTB TRANSPORTATION LLC		
The new name must be distinguishable and contain the words "Limited Liability Com	pany," the designation "CLC" 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:		
(Muiling address MAY BE A POST OFFICE BOX)		
	·	
B. If amending the registered agent and/or registered office address	s on our records, <u>enter the</u> ne	me of the new registe
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
AND THE PROPERTY OF THE PROPER	Enter Florida spret address	
	. Florida	

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

Zip Code

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
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			_ [] Change
			_ ≅ Add
			_ ©Remove
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record specifies a delayed effect I is filed.	ye date, but n	wt an effecti	e time, at 12:	6) a.m. on t	he earlier of:	(b) The S	Oth day wher th
January 16		2025					
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