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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: EJS Transport Solution 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:
Laura Suarez Name of Person
ESS Transport Solution LLC
78/5 NW 73 Ave
Tanarac FL 33321 City/State and Zip Code L Suarez 9817 @ gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Laura Suarez at (186) 337-0475 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$255.00 Filing Fee Certificate of Status \$555.00 Filing Fee & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EJS Transport Solution LLC
(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 121 Florida document number <u>L 23000 55 3906</u> 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 "LLC" 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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

Enter Florida street address

_, Florida _

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

Title Name Address Type of Action AMBR James Suarez 7815 NW 73 Ave DAND (Change From Pres to AMBR) Tamarac, FL 33327 DRemo Change _____ □Add □Remove ______ □Change □Remove _____ Change ___ □Remove _____ 🗆 Add ..._ □Remove ____ 🗀 Change Db∧□

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d June	17	_, 202	<u>4</u> .			
	wa Li Signature of	a member or au	thorized represen	tative of a member	<u>.</u>	
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