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To.

Division of Corporations

Fax Number : (858)617-6383

FION'

Account Name : REGISTERED AGENTS INC.

Account Number : 120890000881 Phone : (307)206-2803 Fax Number : (813)436-5206

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SAEZ & SAEZ TRUCKING, LLC

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T. LEMIEUX

JUL 1 1 2024

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Saez & Saez Trucking, LLC (Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our recordited Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Comp	pany were filed on 03/08/24	and assigned
Florida document number <u>L24000118807</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Saez & Saez LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		45
		. (4)
Enter new mailing address, if applicable:		· <
Mailing address MAY BE A POST OFFICE BOX)		1
		0
		<u> </u>
B. If amending the registered agent and/or registered off	fice address on our records, <u>enter</u>	• []
agent and/or the new registered office address here:		2;
		3
Name of New Registered Agent:	 	
New Registered Office Address:		
men registered various radices.	Enter Florida street addre	<i>y</i>
	, Florida	
	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.

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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
AMBR	SAEZ, ROJELIO	7901 4TH ST N STE 300	□Add
		ST. PETERSBURG, FL 33702	☑Remove
			□ Change
AMBR	SAEZ, ROBERT	7901 4TH ST N STE 300	
		ST. PETERSBURG, FL 33702	₹Remove
			□ Change
			□Add
			□Remove
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			f\Add
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			□Add
		□Remove	
		□ Change	
		DAdd	
			□Remove

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D. If amending any other informa	ation, enter change(s) here: (Attach additional sheets, if neces	sary.)
		
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•		-
		<u> </u>
		
		
		
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		_
 (If an effective date is listed, the date mi 	e date of filing:	iling.) Pursuant to 605.0207 (3)(
f the record specifies a delayed effecti ecord is filed.	ive date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th day after the
Dated July 10	2024	
	Rober on Janey	
	Signature of a member or authorized representative of a member	
Robin Jones		
	Typed or printed name of signee	