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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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| TO: Registration S Division of Co | | · |
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| | ucking LLC | |
| SOBJECT. | Name of Limited Liability Company | |
| | of Amendment and fee(s) are submitted for filing. | |
| · | Richard Rojas | |
| | Name of Person | |
| | Rojas Trucking LLC | |
| | Firm/Company | |
| | 6816 NW 179th St Apt. 205 | |
| | Address | |
| | Hialeah, FL 33015 | |
| | City/State and Zip Code rojasinsurance79@gmail.com | <u> </u> |
| | E-mail address: (to be used for future annual report notification) | |
| for further information of | concerning this matter, please call: | |
| Richard Rojas | 646 9120286 | |
| Name o | of Person at () Area Code Daytime Telephone Nu | mber |
| Enclosed is a check for t | the following amount: | |
| ■ \$25.00 Filing Fee | Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) | 00 Filing Fee, ifficate of Status & iffied Copy ifional 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

Rojas Trucking 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 April 10, 2024 _____ and assigned Florida document number <u>L24000171844</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 "LLC." 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 | Richard Rojas | 6816 NW 179th St Apt. 205 | ≅ ∆dd |
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| MGR | Oribel Rojas | 6816 NW 179th St Apt. 205 | = Add |
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| Effective date, if oth (If an effective date is liste Note: If the date inse document's effective of | ed, the date must be spec rted in this block doc | cific and cannot be prices not meet the appl | icable statutory fili | (option nore than 90 days after f ng requirements, this | nal) iling.) Pursuant to 605,0207 (, date will not be listed as th |
| ne record specifies a del ord is filed. | layed effective date. | but not an effective | time, at 12:01 a.m | on the earlier of: (b) | The 90th day after the |
| June 21st | | 2024 | | | |
| Dated | 1 | <u> </u> | | | |
| Dated | July 1 | nfal- re of a member or aud | | | |