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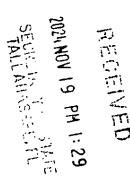
(Requestor's Name)	_
(Address)	_
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





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11/19/24--01003--018 **25.00



COVER LETTER

TO: Registration Se Division of Cor			
CG Fre	ight Lines LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	George Stratiga	kis 	
		Name of Person	
	CG Freight Lines	LLC	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	6904 Pointe V	Vest Blvd	
		Address	
	Bradento	on FL 34209	
		City/State and Zip Code	
		Sstratig@gmail.com to be used for future annual re	port notification)
For further information c	oncerning this matter, please c		
George Stratiga	ıkis	at (203)	942 8399
Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is a check for th	ne following amount:		
12 \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclos	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S		Street Add Registrati	ress: on Section
Division of C			of Corporations
P.O. Box 632			re of Tallahassee
Tallahassee, l	FL 32314	2415 N. N	Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CG Freight Lines LLC

(N # ab. 1 :: a. 11:)	Little Comment		·- <u>-</u>
(A Flo	bility Company as it now apperida Limited Liability Company	r)	
The Articles of Organization for this Limited Liability Florida document number Bradenton FL 34209	v Company were filed on _	10/22/2024	and assigned
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability company	<u>here</u> :	
The new name must be distinguishable and contain the words "I	Limited Liability Company," the	e designation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD.	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
maning duaress MAT BE A POST OFFICE BOX			
			_
B. If amending the registered agent and/or registe agent and/or the new registered office address here		records, enter the name	of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Enter F	lorida street address	
		. Florida	
	Ciţv	11011da	Zip Code
New Registered Agent's Signature, if changing Registe	ered Agent:		
I hereby accept the appointment as registered ages provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this chang	l complete performance of l agent as provided for in ered office address, I her	of my duties, and I am fa Chapter 605, F.S. Or, i	miliar with and f this document is

If Changing Registered Agent, Signature of New Registered Agent

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	1 ype of Action
MGR	Christopher Stratigakis	6904 Pointe West Blvd Bradenton FL 34209	⊡Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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Note: I	e date, if other than the date of filing:
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ord is file	γ
Dated _	11/18/2024
Dated _	
	Communication and an all annels de The annels de Laboration and the communication and the communications.
	Signature of a plember of authorized representative of a member 6 eo y g e Stratigation Typed or printed name of signee

Filing Fee: \$25.00