1/28/25, 2:24 PM

Division of Corporations

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.

(((H25000033264 3)))



H2500003326434BCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number: I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

\*\*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 SUPERIOR ROADRUNNER TRANSPORTATION, PROFESSIONAL LIM

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

Help

To:

### **COVER LETTER**

•	COVERLETTER	
FO: Registration S Division of Co		
SUBJECT: SUPERIOR	ROADRUNNER TRANSPORTATION, PROFESSIONAL LIMITED LIABILITY COMPANY	
	Name of Limited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are submitted for filing.	
Please return all corresp	condence concerning this matter to the following:	
	Erik Treutlein	
	Name of Person	
	Legalzoom.com, Inc.	
	Firm/Company	
	9900 Spectrum Dr	
	Address	
	Austin, TX 78717	
	City/State and Zip Code	
	tyrellgeorge†2@gmail.com	
	E-mail address: (to be used for future annual report notification)	
For further information	concerning this matter, please call:	
Erik Treutlein	800 773-0888	
Nama	at () of Person Area Code Daytime Telephone Number	

MAILING ADDRESS:

☐ \$30.00 Filing Fee &

Certificate of Status

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

□ \$60.00 Filing Fee.

Certified Copy

Certificate of Status &

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301

■ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

To:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUPERIOR ROADRUNNER TRANSPORTATION, PROFESSIO	NAL LIMITED MABILITY COMPANY	
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.) oility Company)	
The Articles of Organization for this Limited Liability Company we	ere filed on 01/15/2025	and assigned
Florida document number L25000027866		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	y company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>	
(Principal office address MUST BE A STREET ADDRESS)		
-		
Enter new mailing address, if applicable:		<b>2023</b>
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	<u> </u>
_		128
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	e address on our records, <u>en</u>	iter the Hame of the new
		경 등 등 등
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street address	
	, Florida	Zip Code
	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.

If Changing Registered Agent, Signature of New Registered Agent

To: Page: 5 of 6

2025-01-28 12:29:02 PST

LegalZoom.com, Inc

From: Melanie Ibarra

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	<u>Address</u>	Type of Action
AMBR	Robinson, Lyle A	3626 Abbey Way	
		Gainesville, GA 30507	C Persona
			Change.
			☐ Remove
		AL LANGERING.	☐ Change
		<u>.                                    </u>	□ Add
			Remove
			□ Change
			D Add
		. And the control of	☐ Remove
			Change
			Add
			☐ Remove
			☐ Change
			D Add
			□ Remove
			☐ Change

•	Page: 6 of 6	2025-01-28 12:29:02 PST	LegalZoom.com, Inc.	From: Melanie II
D. If an	nending any other informatio	n, enter change(s) here: (Attach o	idditional sheets, if necessary.)	
			<u> </u>	
				<u></u>
				<del></del>
			***************************************	
			<u> </u>	
		·		<del></del>
		·		
			-	
			· · · · · · · · ·	
			-	
<u>Note</u>	etive date, if other than the date of the date is listed, the date must be at the date inserted in this block ment's effective date on the Depa	does not meet the applicable statutory	(optional) g or more than 90 days after filing.) Pursuant v filing requirements, this date will not	t to 605.0207 (3)(b) be listed as the
If the re (b) Th	ecord specifies a delayed e e 90th day after the record	ffective date, but not an effect his filed.	ive time, at 12:01 a.m. on the	earlier of:
Date	d January 28th	. 2025		
	/S/ Tyrell D George	9		
	Sig	nature of a member or authorized represer	ntative of a member	
	Tyrell D George			
		Typed or printed name of sig	nec	

Page 3 of 3

Filing Fee: \$25.00