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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 Phone : (844)449-3624 Fax Number : (512)597-0678

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

Email	Address:
	Muuless.

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 007QUESADA LLC

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K. SALY

AUG 7 7 2025

Electronic Filing Menu

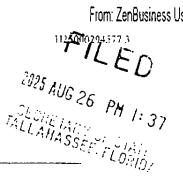
Corporate Filing Menu

Help

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To:

## ARTICLES OF AMENDMENT ·TO ARTICLES OF ORGANIZATION OF



007QUESADA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

New Registered Office Address:		
Name of New Registered Agent:		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registered
(Mailing address MAY BE A POST OFFICE BOX)		
Enter new mailing address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new principal offices address, if applicable:		
	my company, the designation EEC or	the hopfevation (L.E.C.)
Trucking quesada LLC The new name must be distinguishable and contain the words "Limited Liabil	Ko. C. viv. Pale I viv. or M. t.C.	21 III 22 M E Z 2 2
A. If amending name, enter the new name of the limited liah	ility company here:	
This amendment is submitted to amend the following:		
Florida document number 1.25000366719		
The Articles of Organization for this Limited Liability Company	were filed on 08/11/2025	and assigned

## 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:

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 = N $AMBR = A$	lanager authorized Member		
<u>Title</u>	Name	Address	Type of Action
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			□Remove
			□Change
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			Remark
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To:

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ective date, if other than the effective date is listed, the date is listed in this uncent's effective date on the	s block does not n	nee: the applicab	le statutory filing	(optione than 90 days effer requirements, this	onal) filing.) Pursuant to edate will not be	605.0207 (. listed as tl
record specifies a delay he 90th day after the r			an effective ti	me, at 12:01 a	i.m. on the ea	rlier of:

Page 3 of 3

Filing Fee: \$25.00