L9800002772

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2023 OCT 13 PH 1:46

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COVER LETTER

TO: Registration So Division of Co			•	
Division of Col	porations		. .	
SUBJECT: Allied Tr	ucking of Palm Beach, L.C.		2023	
	Name of Lin	nited Liability Company	.30	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	2023 OCT 1 3 FM	
	•	J		
riease return an correspo	ondence concerning this matter	to the following:	1:46	
	Daniel Merino			
		Name of Person		
Allied Trucking of Palm Beach, L.C.				
		Firm/Company		
	10761 NW	89th Avenue		
		Address		
	Hialeah Garde	ens, FL 33018		
		City/State and Zip Code		
	dmerino@alliedtk.com			
	E-mail address: (to be used for future annual report notif	ication)	
For further information of	oncerning this matter, please o	all:		
Alejandro	o Cusco	at (305) 699-931	12	
Name o	f Person	at ()699-931 Area Code Daytime	Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

023 0CT 13 PH 1: 46

Allied Trucking of Palm Beach, L.C. (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) November 19, 1998 and assigned The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>L98000002772</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 "L.L.C." 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: Daniel Merino Name of New Registered Agent: 10761 NW 89th Avenue New Registered Office Address: Enter Florida street address Hialeah Gardens

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

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
			□Add
			□ Remove
			Change
			□Remove 23 ○Change
			□Remove
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ctive date, if other than the date of filing	: (optiona	al)
 If the date inserted in this block does not r 	cannot be prior to date of filing or more than 90 days after filing eet the applicable statutory filing requirements, this day	ng.) Pursuant to 605.02 ate will not be listed :
ment's effective date on the Department of S	ate's records.	
ord specifies a delayed effective date, but not	an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th day after th
filed.		
Salack	2023	
1 Dept 28-	7/1	
	and of	
Signature of a r	nember or authorized representative of a member	
	<i>K</i> 1	

Filing Fee: \$25.00