

L22000343163

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

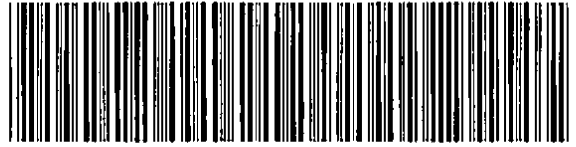
(Document Number)

Certified Copies _____

Certificates of Status _____

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FILED

2022 OCT 17 AM 8:53 2022 OCT 17 AM 8:47

SECRETARIAT OF STATE
TALLAHASSEE, FL

A. BUTLER
OCT 17 2022

A. B.

OCT 17 2022

COVER LETTER

TO:- Registration Section
Division of Corporations

SUBJECT: Rocky howm LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Roxwayne Dunkley
Name of Person

Firm/Company

2223 N Hastings ST
Address

Orlando FL 32808
City/State and Zip Code

dunkleyRoxwayne92@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Roxwayne Dunkley at (407) 509-9811
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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
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

FILED

Rocky bowin LLC

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

2022 OCT 17 AM 8:53

SECRETARY OF STATE
FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 08/03/2022 and assigned Florida document number L22000343163.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Rocky D. Transportation LLC

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)

2223 N Hastings St
Orlando FL 32808

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2223 N Hastings St
Orlando FL 32808

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:

Dunkley Roxwayne

New Registered Office Address:

2223 N Hastings St

Enter Florida street address

Orlando

City

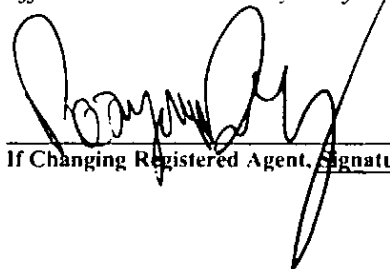
Florida

32808

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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Aldia Abati	1150 Byerly way orl / FL 32818	<input checked="" type="checkbox"/> Add AB *
MGR	Aldia Abati	1150 Byerly way orlando, FL 328	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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