118000098625

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





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COVER LETTER

Division of C	•		
SUBJECT:	ANSPORTATION, LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles o	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	NELDO J ESPIN HUERT	`A	
		Name of Person	• •
	N&H TRANSPORTATIO	ON, LLC	:
		Firm/Company	
	4810 SW 10TH STREET		
		Address	
	PLANTATION, FL 33317	7	· · · · · · · · · · · · · · · · · · ·
		City/State and Zip Code	
	NHTRANSPORTATION2	2@GMAIL.COM to be used for future annual report noti	Carlina
For further information	concerning this matter, please c		accanony
NELDO J. ESPIN HU	JERTA	954 391 - 3293 at ()	
Name	of Person	Area Code Daytim	e Telephone Number
Inclosed is a check for	the following amount:		
	-	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis	LING ADDRESS: tration Section ion of Cornorations	STREET/COURI Registration Section	on

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

N&H TRANSPORTATION, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	Company were filed on	and assigned
Florida document number L18000098625	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR		•
		•
Enter new mailing address, if applicable:		·
(Mailing address MAY BE A POST OFFICE BOX)		
		_
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		he name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florida	
	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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	HENRY F DIAZ QUINTERO	21810 CYPRESS CIR APT 26-B BOCA RATON, FL 33433	Add
			■ Remove
			Change
MGR	MADELAINE HERNANDEZ	4810 SW 10TH STREET PLANTATION, FL 33317	Add
			Charee
			; , Add
			Remo ·~
			Change
			□ Remove
			Change
			□ Remove
			Change
			
			Remove
			□ Change

	
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ective date, if other than the date of filing: a effective date is listed, the date must be specific and cannot be prior to date of filing te: If the date inserted in this block does not meet the applicable statutory	(optional) og or more than 90 days after filing.) Pursuant to 605.0207 by filing requirements, this date will not be listed as
nument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effect he 90th day after the record is filed.	tive time, at 12:01 a.m. on the earlier of
ed October 30 . 2018.	
Signature of a member or authorized represer	

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Filing Fee: \$25.00