

L22000205838

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

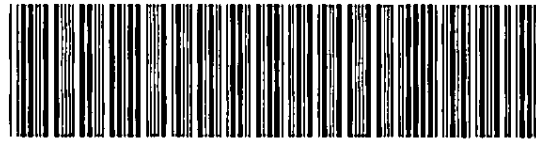
(Business Entity Name)

(Document Number)

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2022 SEP 30 PM 12: 34  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** D&A.TRANSPORTATION SOLUTIONS 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:

HEIDY RODRIGUEZ

Name of Person

UNION CARRIER SERVICES

Firm/Company

5643 NW 74 AVE

Address

MIAMI, FL 33166

City/State and Zip Code

UNIONCARRIERSERVICES@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

HEIDY RODRIGUEZ

305 3921035  
at ( )

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

D & A transportation Solutions LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 5/2/2022 and assigned Florida document number L22000205838

This amendment is submitted to amend the following:

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

N/A.

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)

1306 Raintree Bend Apt 308  
CLERMONT, FL 34714

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1306 Raintree Bend Apt 308  
CLERMONT FL 34714

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:

Lianny Perez Morales

New Registered Office Address:

1306 Raintree Bend Apt 308

CLERMONT, Florida 34714  
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.

X Lianny Perez Morales

If Changing Registered Agent, Signature of New Registered Agent

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SECRETARY OF STATE  
TALLAHASSEE, FL

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>
AMBR	ALEXANDER ROCA SR	635 BLAKE AVE	<input type="checkbox"/> Add
		DAVENPORT, FL 33897	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	LIANNY PEREZ MORALES	1306 RAINTREE BEND APT 308	<input checked="" type="checkbox"/> Add
		CLERMONT, FL 34714	<input type="checkbox"/> Remove
		1306 RAINTREE BEND APT 308	<input checked="" type="checkbox"/> Change
AMBR	DONIEL RODRIGUEZ TOLEDO Sr	CLERMONT, FL 34714	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change



New (new physical & address) AMBR & Register agent.

Florida

DRIVER LICENSE

P625-520-98-962-0

PEREZ MORALES

1226 RAIN TREE BEND APT 311  
CLERMONT FL 34714

DOB 12 22 1998

EXP 12 22 2028

SEX NONE HAIR NONE

08082915

38103001



*AMBR*