

# L22000207190

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

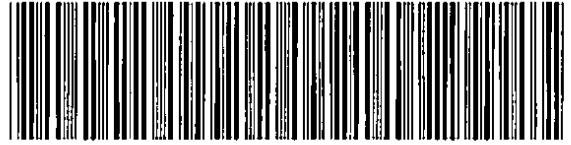
(Business Entity Name)

(Document Number)

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LLC Amend

FILED  
2022 DEC 6 AM 10:58

2022 DEC 6 10:58 AM

2022 DEC -6 AM 10:49

A. RAMSEY  
DEC -6 2022

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ROADWAY TRANSPORTATION 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:

ANA L CABALLERO

Name of Person

Ana L Caballero /ROADWAY TRANSPORTATION LLC  
Firm/Company

1334 BRIAN WAY

Address

WEST PALM BEACH FL 33417

City/State and Zip Code

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

For further information concerning this matter, please call:

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)

Mailine 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

FILED

2022 DEC -6 AM 10: 58

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

ROADWAY TRANSPORTATION 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 05/03/2022 and assigned Florida document number 1.22000207190

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: 18010 SW 197TH AVE, MIAMI, FL, 33187  
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: PO BOX 440863, MIAMI, FL 33144  
(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:

Name of New Registered Agent: ANA J PEREZ MUNOZ

New Registered Office Address: PO BOX 440863 - 7000 SW 1102nd ave Miami FL 33173  
MIAMI, Florida 33144  
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.

AJP  
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>
<u>P</u>	<u>Ana L Caballero</u>	<u>1334 Brian Way West Palm</u>	<input type="checkbox"/> Add
		<u>beach, FL 33417</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>P</u>	<u>YASSER A Tabares</u>	<u>1334 Brian Way West</u>	<input type="checkbox"/> Add
		<u>Palm beach, FL 33417</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>P</u>	<u>Ana J Perez Muñoz</u>	<u>18010 SW 197th ave,</u>	<input checked="" type="checkbox"/> Add
		<u>miami, FL, 33187</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: 09/14/2022 (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated SEPTEMBER 14, 2022.

AJP  
Signature of a member or authorized representative of a member

ANA J PEREZ MUNOZ  
Typed or printed name of signer

Filing Fee: \$25.00