## 4200000054

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A. RAMSEY APR 1 5 2022

## **COVER LETTER**

TO: Registration S	ection		
<ul> <li>Division of Co</li> </ul>	- :- ·	- ,	1 _
SUBJECT: Ha	11sway 100	insport L	-7)
Nan	ne of Florida Limited Partn	ership or Limited Liability	Limited Partnership
The enclosed Certific	ate of Amendment and	I fee(s) are submitted	for filing.
Please return all corre	espondence concerning	this matter to:	
	,		
AIMIL	Contact Person  Firm/Company  TS RD. Apt.		
	Contact Person		
Halleway	I ransport	LTD	
<del></del>	Firm/Company		
USCI HAR	Address  Add	902	
	Address	,	
Jacksonu	·lle 1-6	32218	
Ci	ty, State and Zip Code	<del></del>	
ilahall I	1 (a) Value	0.600	
E-mail address: (to b	be used for future annual re	port notification)	
For further information	on concerning this mat	ter, please call:	
TAITHE	Hall	4650.5	ime Telephone Number
Name of Contac	1 Person	at ( X ) ) )	ime Telephone Number
Name of Contac	i i cison	Area Code and Days	ane retephone Number
Enclosed is a check for	or the following amour	nt:	
☐ \$52.50 Filing Fee	□\$61.25 Filing Fee	□\$105.00 Filing Fee	198113 75 Filing Fee
L. War. Do I Hing I Co	and Certificate of		
	Status		Certificate of Status
Mailing Address:		Street Addre	ss:
Registration Section		Registration S	
Division of Corporati	ons	Division of C	
P.O. Box 6327		The Centre of	f Tallahassee
Tallahassee, FL 3231-	4	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

## CERTIFICATE OF AMENDMENT TO

FILED

CERTIFICATE OF	LIMITE	PARTNE	RSHIP MAR	20 5	
11 11	OF /	,	51	30 PM 12	34
Hallsway Transp	gort	450		SEEST STA	Ţ.
Insert name currently on fi			t of State	1966 FL 90	, <del></del> .
Pursuant to the provisions of section 620.1202, F		-		•	
limited liability limited partnership, whose certifi <u>1113 / ユンコン</u> , assigned Flo					
adopts the following certificate of amendment to					<del></del>
			•		
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the l	imited par	tnership or	limited liabil	ity limited p	<u>artnership</u>
here:					
	·	<u>.</u>			· <del></del>
New name must be distinguish	nable and co	ntain an accep	table suffix.		
Acceptable Limited Partnership suffixes: Limited Partnersh					
Acceptable Limited Liability Limited Partnership suffixes:	Limited Lial	oility Limited I	Partnership, L.	L.L.P. or LLLi	<b>'</b> ,
B. If amending mailing address and/or princi	pal office	address, <u>en</u>	ter new ma	iling addre	ss and/or
principal office address here:					
New Principal Office Address:					
(Must be STREET address)					-
					-
New Mailing Address:					
(May be post office box)					· -
	<del></del>				-
C. If amending the registered agent and/or register			records, <u>ent</u>	er the name	of the new
registered agent and/or the new registered office ad	aress nere				
Name of New Registered Agent:					-
New Registered Office Address:	· · ·				-
	E	nter Florida	street address	;	
			, Florida		_
<del></del>	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.

If Changing Registered	Agent,	Signature of	New Res	istered Agent

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

<u>Title</u>	<u>Name</u>		Address	Type of Action
CEOlG	<u>LEESHA</u>	HALL	11501 HARIS RD. Apt. 902 JACKSONVILLE, FL	_ dandd _ □ Remove
<del></del>				_
<del></del>				_ □ Add □ □ Remove
				_ □ Add □ Remove
<del></del>		<del></del>		_
		<u>_</u>		_ □ Add □ Remove

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

- ☐ This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
- This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

·					
				-,	
	· · · · · · · · · · · · · · · · · · ·		-		
Effective date, if other than the da	te of filing:	<del> </del>	····-		
(Effective date cannot be prior to nor mo State.)	re than 90 days a	fter the date	this document	is filed by the Fl	orida Department (
Note: If the date inserted in this block do				quirements, this	date will not
be listed as the document's effective date	on the Departme	nt of State's	records.		
Signature(s) of a general partne	r or all genera	l partners	*:		
*NOTE: Only one current general part	ner is required to	sign this doci	ument unless	he limited partno	ership is adding or
removing a "limited liability limited part when adding or removing a "limited liab	nership" election : ility limited partne	statement. C ership" electi	hapter 620, F on statement.	.S., requires all g	eneral partners to s
	-	•	•		
Stome Idal	3/28/	/22			
Jan 6 1140P	3/28/2 3/28/2	, _ , _			
Mestric / free	<u> </u>	_			
			·- <u>-</u> ·		
		_			
Signature(s) of all new or dissoc	iating general	partner(s	), if any:		
		_		<del></del>	· · · · · · · · · · · · · · · · · · ·
		_			
				····	<del></del>
		_			<u> </u>
Filing Fee:	\$52.50				
Certified Copy (optional):	\$52.50 \$52.50				
Certificate of Status (optional):	\$8.75				