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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: NV Transportation & Logistics 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:

Iris L. Nolasco

Name of Person

NV Transportation & Logistics LLC

Firm/Company

10635 Pontofino Circle

Address

Trinity Florida 34655

City/State and Zip Code

iris_nolasc@yahoo.com

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

For further information concerning this matter, please call:

Iris L. Nolasco, Treasurer

at (727) 236-6286

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/COURIER ADDRESS:

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

N.V. Transportation & Logistics LLC

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
MGRM	Iris L. Nolasco	10635 Pontofino Circle	<input type="checkbox"/> Add
		Trinity, Florida 34655	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Gerald Nolasco - 100% OWNER

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated March 11, 2015

Iris L. Nolasco

Signature of a member or authorized representative of a member

Iris L. Nolasco

Typed or printed name of signee

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Filing Fee: \$25.00

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CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA