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| (Red | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | Certificates | s of Status |
| Special Instructions to F | Filing Officer: | |
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S. WARREN
JUN 2 3 2017

COVER LETTER

| TO: | Registration Sec Division of Corp | | | |
|-----------|--------------------------------------|--|---|--|
| CT IN AT | | NSPORTATION SOLUTION | SS LLC | |
| SUBJE | CT: | Name of Lim | ited Liability Company | |
| The enc | losed Articles of ? | Amendment and fee(s) are sub- | mitted for filing. | |
| Please re | eturn all correspor | ndence concerning this matter | to the following: | |
| | | DOUGLAS GUTIERREZ | | |
| | | <u></u> | Name of Person | |
| | | | Firm/Company | |
| | | 11850 DR MARTIN LUT | HER KING JR STREET NORTH / | APT 3106 |
| | | | Address | |
| | | ST PETERSBURG, FL 33 | 716 | |
| | | | City/State and Zip Code | . . |
| | | DOUG@ELITETRANSP.C | TOM to be used for future annual report notif | · Cartina |
| For furt | her information co | oncerning this matter, please ca | | ication) |
| DOUG | LAS GUTIERRE | Z. | 813 215-9516 | |
| | Name of | Person | at () Area Code Daytime | : Telephone Number |
| Enclose | d is a check for th | e 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 radditional 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

| ELITE | TRANSPORTA | TION SOL | JUTIONS LLC |
|-------|------------|----------|-------------|
|-------|------------|----------|-------------|

(Name of the Limited Liability Company as it now appears on our records.)

| The Articles of Organization for this Limited Liability C Florida document number $\frac{1.10000128972}{1.10000128972}$ | Company were filed on $\frac{F}{}$ | LORIDA and assigned | |
|---|--|--|--|
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the lim | ited liability company b | <u>iere</u> : | |
| The new name must be distinguishable and contain the words "Lin | nited Liability Company," the | designation "LLC" or the abbreviation "L.L.C." | |
| Enter new principal offices address, if applicable: | 11850 DR MA | RTIN LUTHER KING JR STREET NORTH A | |
| (Principal office address MUST BE A STREET ADDI | RESS) ST PETERSB | ST PETERSBURG, FL 33716 | |
| (Mailing address MAY BE A POST OFFICE BOX) | ST PETERSB | URG, FL 33716 | |
| B. If amending the registered agent and/or regis | | n our records, enter the name of the ne | |
| Name of New Registered Agent: DOUG | GLAS GUTIERREZ | | |
| New Registered Office Address: 11850 | 11850 DR MARTIN LUTHER KING JR STREET NORTH APT 3106 Enter Florida street address | | |
| | | | |
| STPI | ETERSBURG, | Florida 33716 | |
| | City | Zip Code | |

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. Of 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

Page 1 of 3

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> | Name | <u>Address</u> | Type of Action |
|--------------|--------------------------|----------------------------|---|
| MGR | DOUGLAS GUTIERREZ | 11850 DR MARTIN LUTHER KII | |
| | | ST PETERSBURG, FL 33 | □ Remove |
| | | | Change |
| MGR | CORREA INVESTMENTS & CON | 13046 RACETRACK RD # 232 | |
| | | TAMPA, FL 33626 | Remove |
| | | | Change |
| MGR | Correa, Javier A, Sr. | 13046 RACETRACK RD # 232 | |
| | TAMPA, F1, 33626 | TAMPA, F1, 33626 | ■ Remove |
| | | | ☐ Change |
| | | | |
| | | | ☐ Remove |
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| Effective date, if other than the fan effective date is listed, the date m | e date of filing: | 017 | (optional) | |
| an effective date is listed, the date m | ust be specific and cannot be p block does not meet the ap | plicable statutory filing requir | | |
| locument's effective date on the | Department of State's reco | ords. | | |
| e record specifies a delaye | ed effective date, but | not an effective time. | at 12:01 a.m. on | the earlier (|
| The 90th day after the re | | · | | |
| . , MAY /6 | 2017 | | | |
| Dated MAIN | <i></i> | | | |
| | 1112 | | <u> </u> | |
| | Signature of a member or : | authorized representative of a me | mber Test | JU |
| JAVIERA CORREA | | | | |
| - | Typed or p | rinted name of signee | | P 0 |
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Filing Fee: \$25.00