

212000085994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

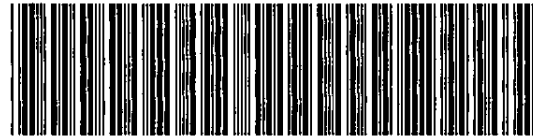
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2012 SEP 10 PM 4:49
CLERK OF STATE
TALLAHASSEE, FL 32310

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: YAOTL & NATI TRANSPORT 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:

ANTONIO GABRIEL-LOPEZ

Name of Person

YAOTL & NATI TRANSPORT LLC

Firm/Company

5501 APPLGATE DRIVE

Address

SPRINGHILL, FL 34606

City/State and Zip Code

ANTONIO195619@YAHOO.COM.MX

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

For further information concerning this matter, please call:

ANTONIO GABRIEL-LOPEZ

Name of Person

at (786)

546-6398

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

FILED
TALLAHASSEE, FL 32301
SEP 10 2012

2012 SEP 10 PM 4:49

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

YAOTL & NATI TRANSPORT 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 06/29/2012 and assigned
Florida document number L12000085994.

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 end with 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)

5501 APPLGATE DRIVE

SPRINGHILL, FL 34606

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5501 APPLGATE DRIVE

SPRINGHILL, FL 34606

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2012 SEP 10 PM 4:19
CLERK OF DISTRICT COURT
HALL COUNTY, FLORIDA

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:

ANTONIO GABRIEL-LOPEZ (name correction only)

New Registered Office Address:

5501 APPLGATE DRIVE

Enter Florida street address

SPRINGHILL,

Florida

34606

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 608, 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JUAN CARLOS FONSECA	7102 RIVER RUN BLVD WEEKIWACHEE, FL 34607	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

PLEASE CORRECT SPELLING OF MANAGER MR. ANTONIO

CORRECT SPELLING OF LAST NAME IS : GABRIEL-LOPEZ

NOT ANTONIO G. LOPEZ, GABRIEL IS NOT HIS MIDDLE NAME

Dated AUGUST 28, , 2012 .

Signature of a member or authorized representative of a member

ANTONIO GABRIEL-LOPEZ

Typed or printed name of signee