L13000056599

(Re	questor's Name)	
-	,	
(Ad	dress)	,
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
,	,	
Certified Copies Certificates of Status		s of Status
Special Instructions to	Filing Officer:	
·		

Office Use Only



600286039126

05/23/16--01051--015 **35.00

16 JUN 17 PM 2:21

SECRETARY OF STATE
AND AHASSEE, FLORID

JUN 2 0 2016 Y SULKER



May 27, 2016

IVAN SOSA 9010 SW 125TH AVE APT G 208 MIAMI, FL 33186

SUBJECT: I&S TRANSPORT LLC Ref. Number: L13000056599

We have received your document for I&S TRANSPORT LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 316A00011286

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

I&S TRANSPORT LLC							
(Name of the Limited (A	Liability Compa Florida Limited	ny as it now appears or Liability Company)	our records.)				
The Articles of Organization for this Limited Liab Florida document number L13000056599	ility Company	were filed on FLOR	IDA	and assigned			
This amendment is submitted to amend the follow	ing:						
A. If amending name, enter the new name of th	ne limited liab	ility company here:					
he new name must be distinguishable and contain the word	ls "Limited Liabi	lity Company," the desig	nation "LLC" or the ab	breviation "L.L.C."			
Enter new principal offices address, if applicab	le:	17 POINCIANA LI	٠				
Principal office address MUST BE A STREET.	ADDRESS)	PALM COAST, FL 32164					
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BO	• • • • • • • • • • • • • • • • • • • •		WEST PALM BEACH, FL 33415				
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:			ır records, <u>enter</u>	the name of the			
New Registered Office Address:	5160 CANAL			SS			
	WEST PALM	Enter Florida BEACH	street address , Florida _ ³³	## 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
		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.

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 = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			Change
			Add
			☐ Remove
			☐ Change
			Add
			□ Remove
			Ciminge
			SSE AND
			T Remove
			ORAL Change
			Add
			Remove
			☐ Change
			□ Add
			Remove
			. Changa

	· · · · · · · · · · · · · · · · · · ·		
	•		
_			—
_			
_			
_			
		<u> </u>	
_		·	
		Pr	=
		3.2	
_		<u> </u>	<u>=</u>
_		HSS.	7
		10 m	H
_		JIAIT LORIUA	<i>\</i> \ - i
			_ <u>=</u>
n effe <u>te:</u> I	late, if other than the date of filing: Ob/06/2016 Optional	Pursuant t ill not b	o 605.0 e listec
	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. or th day after the record is filed.	n the e	arliei
ted _			

Page 3 of 3

Filing Fee: \$25.00