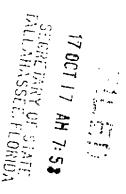
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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	.
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer;	
	Office Use On	ly



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COVER LETTER

Division of Co			
Transprise			
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Mansooreh Mollaghasemi		
	·	Name of Person	
	Transprise LLC		
		Firm/Company	
	11301 Corporate Blvd, Su	ite 303	
		Address	
	Orlando, Florida 32817		
		City/State and Zip Code	
	mmollagha@productivityap	Dex.com To be used for future annual report notif	ication)
For further information of	concerning this matter, please co		
Mansooreh Mollaghaser	ni	407 222-1256	
Name o	of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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)
	ING ADDRESS: ration Section	STREET/COURII Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Transprise LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document numberL13000144702	were filed on October 4, 2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	ility company here:	
FleetZoo LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	abbreviation "L.L.C,"
Enter new principal offices address, if applicable:	11301 Corporate Blvd, Suite 303	
(Principal office address MUST BE A STREET ADDRESS)	Orlando, Florida 32817	
Enter new mailing address, if applicable:	11301 Corporate Blvd, Suite 303 Orlando, Florida 32817	
(Mailing address MAY BE A POST OFFICE BOX)	Orlando, Piorida 32817	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:	Enter Florida street address, Florida	the name of the new
	City	₹Zip Code
		ختر

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 = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			Add
			□ Remove
			Change
			Remove
			Change
			Add
			□ Remove
			Change
			□ Add
			□ Remove
			☐ Change

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	RA 55	
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior Note: If the date inserted in this block does not meet the application document's effective date on the Department of State's records.	(optional) to date of filing or more than 90 days after filing.) Pursuant to 605 able statutory filing requirements, this date will not be liste	
If the record specifies a delayed effective date, but not (b) The 90th day after the record is filed.	t an effective time, at 12:01 a.m. on the earlie	er of:
Dated October 11 . 2017	·	
/ Signature of a member or author	orized representative of a member	
∦ Mansooreh Mollaghasemi		
-	ed name of signee	

Page 3 of 3

Filing Fee: \$25.00