119000152585

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COVER LETTER

TO: Registration Section
Division of Corporations

BUFALO TRANSPORT SERVICES LLC

SUBJECT:

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:

BISMARCK A. ABURTO

Name of Person

BUFALO TRANSPORT SERVICES LLC

Firm/Company

9621 FONTAINEBLEAU BLVD SUITE 114

Address

MIAMI, FL 33172

City/State and Zip Code

accounting@mdxcorporation.com

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

For further information concerning this matter, please call:

Armando Vasquez

__305_**896-4377**

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, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BUFALO TRANSPORT SERVICES LLC

(Name of the Limited	Liability Compa Florida Limited L	ny as it now appears on ou Liability Company)	r records.)	
The Articles of Organization for this Limited L. Florida document number <u>L13000152585</u>	iability Company	were filed on 10/30/20	and assigned	
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company here:		
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ited Liability Company," the	e designation "LECTor the abbreviation	
Enter new principal offices address, if applicable:		9621 FONTAINEBLEAU BLVD		
(Principal office address MUST BE A STREE		Miami, FL 33172	-8 8 8	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
•			5 · · ·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		9621 FONTAINEBLEAU BLVD GUITE 114 Miami, FL 33172		
B. If amending the registered agent and registered agent and/or the new registered of			cords, <u>enter the name of the new</u>	
Name of New Registered Agent:	BISMARCE	K A. ABURTO		
New Registered Office Address:	9621 FONTAINEBLEAU BLVD SUITE 114			
	Enter Florida street address			
	Miami		Florida <u>33172</u>	
		City	Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:	<u>L</u>		
I hereby accept the appointment as registere the provisions of all statutes relative to the p accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	proper and comp istered agent as , registered office	olete performance of my provided for in Chapter	duties, and I fam familiar with and 608, F.S. Or, if this document is	

Page 1 of 3

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u> <u>1</u>	Type of Action
Р	ABURTO, BISMARCK A, SR	9621 FONTAINEBLEAU BLVD SUITE 114 MIAMI. FL 33172	Add
			Remove
MGRM	BISMARCK A. ABURTO	9621 FONTAINEBLEAU BLVD SUITE 114 MIAMI, FL 33172	Add
			Remove
4		A SECULAR HAS	2014 JAN Add
		AHASSEE FLORIDA	Remote Signature
		OR I	3 S C C
			Add
			Remove
			Add
			Remove
			Add
			Remove

lf an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
d _	DECEMBER 201,2018
	* Prompt of them
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

2014 JAN -8 PM 3: 01