

L14000004118

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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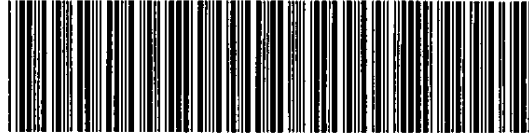
(Business Entity Name)

(Document Number)

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2015 AUG 14 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan AUG 17 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WES 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:

EDWARD BEAUCHAINE

Name of Person

WES TRANSPORT LLC

Firm/Company

3515 E COLUMBUS DRIVE

Address

TAMPA FLORIDA 33605

City/State and Zip Code

ED@GW-TR.COM

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

For further information concerning this matter, please call:

EDWARD BEAUCHAINE

813 333-3752
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

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

FILED
2015 AUG 14 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WES 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 JAN 2, 2014 and assigned
Florida document number L14000004118.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

3515 E COLUMBUS DRIVE

(Principal office address MUST BE A STREET ADDRESS)

TAMPA FLORIDA 33605

Enter new mailing address, if applicable:

3515 E COLUMBUS DRIVE

(Mailing address MAY BE A POST OFFICE BOX)

TAMPA FLORIDA 33605

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:

EDWARD BEAUCHAINE

New Registered Office Address:

3515 E COLUMBUS DRIVE

Enter Florida street address

TAMPA

City

Florida 33605

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 = Manager
AMBR = Authorized Member


<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	WARREN DONALD FRITON		<input type="checkbox"/> Add
		10431 NIGHTENGALE DR,	<input checked="" type="checkbox"/> Remove
		RIVERVIEW FLORIDA 33569	<input type="checkbox"/> Change
AMBR	STEPHEN SHEAR		<input type="checkbox"/> Add
		5704 INTERBAY BLVD	<input checked="" type="checkbox"/> Remove
		TAMPA FLORIDA 33611	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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SECRET
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LORRA

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FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE
WASHINGTON, D.C. 20535

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated AUGUST 10, 2015


Signature of a member or authorized representative

Signature of a member or authorized representative of a member

EDWARD BEAUCHAINE

Typed or printed name of signee