# L14000013556

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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APPROVEU AND FILED

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## COVER LETTER

Div	ision of Corp	porations				
SUBJECT:	ATLAS TRANSPORTATION AND LOGISTICS LLC					
Sobstic 1.		Name of Lim	ited Liability Company			
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspor	ndence concerning this matter	to the following:			
		AMINE MEHL				
			Name of Person	<u> </u>		
	ATLAS TRANSPORTATION AND LOGISTICS LLC					
Firm/Company						
	867 W. BLOOMINGDALE AVE. #7144					
	Address					
		BRANDON, FL 33511				
		mehl1979@yahoo.com	City/State and Zip Code			
		E-mail address: (1	to be used for future annual report notifi	cation)		
For further in	formation co	ncerning this matter, please ca	ıll:			
AMINE ME	Ш.		904 327 - 0808 at ( )			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed is a	check for the	e following amount:				
■ \$25.00 F	iling 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

TO:

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**

#### ATLAS TRANSPORTATION AND LOGISTICS LLC

(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited I	.iability Company	were filed on 01/24/20	and assigned	
Florida document number L14000013556			and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liab	ility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designa	tion "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		867 W. BLOOMINGDALE AVE. #7144		
		BRANDON, FL 33511		
Enter new mailing address, if applicable:		867 W. BLOOMINGDALE AVE. #7144		
(Mailing address MAY BE A POST OFFICE BOX)		BRANDON, FL 33511		
B. If amending the registered agent and registered agent and/or the new registered o	or registered o	ffice address on our e:	records, enter the name of th	
B. If amending the registered agent and registered agent and/or the new registered of	or registered o	ffice address on our <u>e</u> :	records, enter the name of th	
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	or registered o	ffice address on our <u>e</u> :	records, enter the name of th	
registered agent and/or the new registered o	ffice address her	ffice address on our e: MINGDALE AVE. #71		
registered agent and/or the new registered of New Registered Agent:	ffice address her	<u>e</u> :	44	
registered agent and/or the new registered of New Registered Agent:	ffice address her	<u>c:</u> MINGDALE AVE. #71-	44	

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>	Name	Address	Type of Action
MGR	AMINE MEHL	867 W. BLOOMINGDALE AVE.	
		#7144	□ Remove
		BRANDON, FL 33511	Change
MGR	RIDA BENDARIF	867 W. BLOOMINGDALE AVE.	
		#7144	☐ Remove
		BRANDON, FL 33511	■ Change
		<del></del>	□ Remove
			☐ Change
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Note: If the date is l	other than the date of filing isted, the date must be specific and iscreted in this block does not move date on the Department of St	cannot be prior to seet the applicab	date of filing or more le statutory filing r	(option than 90 days after frequirements, this of	nal) iling.) Pursuant to date will not be	o 605.0207 (3)(b listed as the
f the record specif b) The 90th day	ies a delayed effective da after the record is filed.	ate, but not a	an effective tim	ne, at 12:01 a.	m. on the ea	arlier of:
Dated	February 18th	2019				
	J.	Ad	2			
	Signature of a m	tember or authoriz	ed representative of	a member		_
		Amine	Mehl			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00