

L14000108295

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

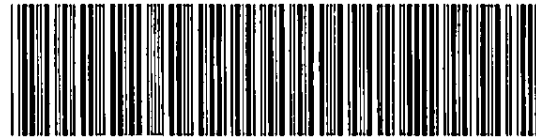
(Business Entity Name)

(Document Number)

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2017 OCT 31 AM 9:24  
FBI AMSTERDAM

2017 NOV -1 PM 4:43  
FBI AMSTERDAM

K. SALY  
NOV -2 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

Whisper 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:

Ramona Bennett  
Name of Person  
Whisper Transport LLC  
Firm/Company  
248 Cypress Dr  
Address  
Lake Park, FL 33403  
City/State and Zip Code

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

For further information concerning this matter, please call:

Ramona Bennett at 561 932-7706  
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, FL 32301

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Whisper Transport LLC

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

2017 NOV -1 PM 4:43  
CLERK OF DISTRICT COURT  
ATLANTA, GEORGIA

The Articles of Organization for this Limited Liability Company were filed on 10/19/2017 and assigned  
Florida document number L14000108295.

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:

(Principal office address MUST BE A STREET ADDRESS)

248 Cypress Dr  
Lake Park, FL  
33403

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

248 Cypress Dr  
Lake Park, FL  
33403

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:

New Registered Office Address:

Enter Florida street address

Florida

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Carlington Coleman	248 Cypress Dr, Lake Park 71	33403 <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Ramon Bennett	248 Cypress Dr, Lake Park 71	33403 <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Wakeland Ennis	1947 Fittin Ct Lake Worth, FL 33461	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
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2011 NOV -1 PM 4:13  
NOT AUTHORIZED TO SIGN

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

2017 NOV -1 PM 4:43  
ALABAMA  
ASSOCIATION

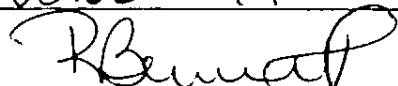
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated October 19, 2017.



Signature of a member or authorized representative of a member

Ramona Bennett

Typed or printed name of signee