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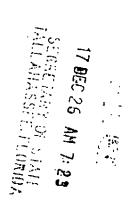
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COVER LETTER

TO: Registration Sec Division of Corp			
Downtown T	ransportation, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Anthony D. George, Jr.		
		Name of Person	
	Fox, Wackeen, et. al.		: Telephone Number ■ \$60.00 Filing Fee, Certificate of Status & Certified Copy
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	3473 SE Willoughby Blvd		time Telephone Number \$60.00 Filing Fee, Certificate of Status & Certified Copy
		Address	
	Stuart, FL 34994		
	-	City/State and Zip Code	
	ageorge@foxwackeen.com		······································
For further information co	e-mail address: (neerning this matter, please ca	to be used for future annual report notifi all:	cationy
Anthony D. George, Jr.		772 287-4444 at ()	
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)	Certificate of Status &

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

Downtown Transportation, LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited I Florida document number L14000109434	Liability Company	were filed on <u>7/10/2014</u>	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	oility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		1451 NW 20 St.	
(Principal office address MUST BE A STREET ADDRESS)		Miami, FL 33142	
Enter new mailing address, if applicable:		1451 NW 20 St.	
(Mailing address MAY BE A POST OFFICE BOX)		Miami, FL 33142	
B. If amending the registered agent and registered agent and/or the new registered of			er the name of the new
Name of New Registered Agent:	Anthony D. Ge	eorge, Jr.	रुप्ति क्या हिं
New Registered Office Address:	3473 SE Willo		
	Stroom	Enter Florida street address	0 - 10 - 13 - 13 - 13 - 13 - 13 - 13 - 1
	Stuart	, Florida	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

Title	<u>Name</u>	Address	Type of Action
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Dated	12/18 2017			
zaicu .				
	Signature of a member or authorized representative of a member			

Page 3 of 3

Filing Fee: \$25.00

ATTACHED SHEET RE: NAME AND ADDRESS CHANGES

The following names and addresses of the Managers of the Company need to be changed as follows:

MGR: Timothy Del Rosal *change to* Timothy Ray Del Rosal Update Address: 1451 NW 20 St., Miami, FL 33142

MGR: Dagmar Del Rosal *change to* Dagmar R. Del Rosal Update Address: 1451 NW 20 St., Miami, FL 33142