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## **COVER LETTER**

TO:	Registration Sec Division of Corp			•				
CI ID I								
SUBJECT: Name of Limited Liability Company								
The er	nclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.					
Please	return all correspor	ndence concerning this matter	to the following:					
		YOSBANY PEREZ						
		MARKETING 101 PLUS.	Name of Person LLC					
		4523 DREISLER DR	Firm/Company	<del></del> -				
		TAMPA FLORIDA 33634	Address	<del></del>				
		YOSBANY_PEREZ@YAF	City/State and Zip Code HOOCOM					
			to be used for future annual report no	lification)				
For fu	rther information co	oncerning this matter, please ca	all:					
YOSE	BANY PEREZ		813 526-4961 at ()					
	Name of	Person	Area Code Daytii	ne Telephone Number				
Enclos	sed is a check for the	e following amount:						
<b>■</b> \$2	5.00 Filing Fec	☐ \$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

(Name of the Lim	ited Liability Compan (A Florida Limited Li	y as it now appears o ability Company)	n our records.)	<del></del>
The Articles of Organization for this Limited L lorida document number L14000146067	_iability Company v	were filed on $\frac{09/18}{}$	/2014	_ and assigned
his amendment is submitted to amend the fol	lowing:			
. If amending name, enter the new name of	of the limited liabil	ity company here	:	
BAYCARE TRANSPORTATION & DELIVERY	Y,LLC			
he new name must be distinguishable and contain the	words "Limited Liabilit	ty Company," the desig	mation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:		4523 DREISLER S	T, TAMPA, FL 33615	
Principal office address MUST BE A STREA	ET ADDRESS)		· <u>-</u>	
Inter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE</u>	E BOX)	4523 DREISLER'S	T, TAMPA. FL 33615	
3. If amending the registered agent and egistered agent and/or the new registered of New Registered Agent:	k.,*	:	ar records, enter th	e name of the
	4523 DREISLEI	₹ ST	SS	23
New Registered Office Address:	TAMPA FLOR	Enter Florida	street address , Florid	₹ m ÷ O

New Registered Agent's Signature, if changing Registered Agent:

MARKETING TOTALLIST FO

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>	Address	Type of Action
MGR	YOSBANY PEREZ	4523 DREISLER ST, TAMPA, FLORIDA, 33634	
			Add
			Remove
			Add
			□ Remove
			Change
		*	Add
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fective date, if other than the an effective date is listed, the date muote: If the date inscrted in this becament's effective date on the D	st be specific an lock does not	id cannot be pri meet the appi	licable stati	filing or mon story filing	e than 90 days requirements	optional after filing this date	) g.) Purs c will r	uant to o	605.01 listed
e record specifies a delaye The 90th day after the rec	d effective cord is filed	date, but r	not an eff	ective tir	ne, at 12:	01 a.m.	on t	he ea	rlier
APRIL 1		2019							
		·		.)					

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Filing Fee: \$25.00

Typed or printed name of signee