

L14000154361

Florida Department of State
Division of Corporations
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PFV TRANSPORTATION LLC**

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Help

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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PFV TRANSPORTATION 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 10/02/2014 and assigned Florida document number L14000154361

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 end with 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)

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE
FLORIDA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

CRISTINA PUYO

New Registered Office Address:

10818 FAIRFIELD VILLAGE DRIVE

Enter Florida street address

TAMPA

, Florida 33624

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.

(Signature)
If Changing Registered Agent, Signature of New Registered Agent

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

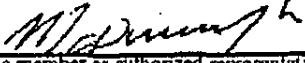
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	<u>MIGUEL PUZO</u>	10818 FAIRFIELD VILLAGE DRIVE TAMPA, FL 33624	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
AMBR	<u>CRISTINA PUZO</u>	10818 FAIRFIELD VILLAGE DRIVE TAMPA, FL 33624	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) H14000267422 3

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
the date this document is filed by the Florida Department of State)

Dated NOVEMBER 17TH, 2014


Signature of a member or authorized representative of a member

MIGUEL PUZO

Typed or printed name of signee

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