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COVER LETTER

TO: Registration Section Division of Corporations

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N.M.H. TRANSPORT LLC

SUBJECT:

,

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:

JACK BARSHISHAT

Name of Person

N.M.H. TRANSPORT LLC

Firm/Company

3389 SHERIDAN STREET #185

Address

HOLLYWOOD FL. 33021

City/State and Zip Code

ASITRISH@BELLSOUTH.NET

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

For further information concerning this matter, please call:

JACK BARSHISHAT 917 657 5646 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) \$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

N.M.H. TRANSPORT 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 or	1 <u></u>	and assigned
Elorida document number L15000045699		

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 "LLC"

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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 on our records, <u>enter the name of the ne</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:	JACK BARSHISHA	Т`	<u>, , , , , , , , , , , , , , , , , , , </u>		
New Registered Office Address:	3389 SHERIDAN STREET #185			19	
		Enter Florida street address		NON	7
	HOLLYWOOD	, Florida	22020.20	21	ر د محمد مد ر <u>محمد م</u>
		Тіңу.	Tri <u>(Zip</u> (all a	in .
New Registered Agent's Signature, if changing	Registered Agent:		01		5

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 Kam Jamiliar 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 add or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGRM	MARAV HEMO		Add
		3389 SHERIDAN STREET HOLLYWOOD FL. 33021	Remove
			Change
MGRM	JACK BARSHISHAT	4712 SHERIDAN STREET HOLLYWOOD FL. 33021	🖬 Add
			Remove
			Change
			Add
			🗖 Remove
			□ Change □ □ □ 16
			Con Change
			Remove
			C Change
			🗆 Add
			Remove
			Change

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

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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)(t 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.

JUNE 17 Dated	2019	
	JB	
	Signature of a member or authorized representative of a member	
JACK BARSHISHA	r	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00