## L150000 72515

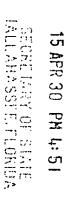
equestor's Name)			
ldress)			
ddress)	F?		
ty/State/Zip/Phone	e #)		
MAIT	MAIL		
usiness Entity Nan	ne)		
ocument Number)			
_ Certificates	s of Status		
Special Instructions to Filing Officer:			
	:		
	Idress)  Idress)  Ity/State/Zip/Phone WAIT  Isiness Entity Nan Document Number)  Certificates		

Office Use Only



700272343877

04/30/15--01011--012 \*\*25.00



J. SHAVETS MAY O R. 2015

## **COVER LETTER**

TO: Registration Se Division of Cor			· .
OLID ED COD	and More, LLC		
SUBJECT:		nited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
	Michelle Murgado		
		Name of Person	<del></del>
	Transport and More, LLC		
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	3663 SW 8 Street #207		
	******	Address	<del></del>
	Miami, FL 33135		
		City/State and Zip Code	<del></del>
	michellemurgado@gmail.c		
		to be used for future annual report notif	ication)
For further information co	oncerning this matter, please c	all:	
Michelle Murgado		786 366-8343	
Name of	Person		e Telephone Number
Enclosed is a check for th	e 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 (add a comm 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

Transport and More, LLC				
( <u>Name of the Limited Liab</u> (A Flori	<mark>ility Company as it now appears on o</mark> da Limited Liability Company)	ur records.)		•
he Articles of Organization for this Limited Liability orida document number £15000072919	Company were filed on April 24	, 2015	and a	assigned
his amendment is submitted to amend the following:	<u> </u>			
. If amending name, enter the new name of the lin	mited liability company here:			
ne new name must be distinguishable and contain the words "L	imited Liability Company." the designa	tion "LLC" or the	abbreviation	'L.L.C."
nter new principal offices address, if applicable:				<del> </del>
Principal office address MUST BE A STREET ADL	DRESS)	<del></del>		
nter new mailing address if annlicable				
inter new mailing address, if applicable:  Mailing address MAY RE A POST OFFICE ROX)				
nter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX)</u>				
Mailing address MAY BE A POST OFFICE BOX)				
Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or reg		records, ente	r the nam	
J		records, ente	250	<del>- 1</del>
Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or reg		records, ente	ALCAE SECRE	15 APR
Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered agent and/or the new registered office ad	dress here:		SECRETARY ALLAHASSE	15 APR 30
Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered agent and/or the new registered office ad  Name of New Registered Agent:		eet address	SECRE IVRY OF	15 APR 30 DH
Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered agent and/or the new registered office ad  Name of New Registered Agent:	dress here:		SECRE IVRY OF	15 APR 30 DH

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
MBR	Jenny B. Diaz	3663 SW 8 Street #207, Miami, FL	<b>=</b> Add
			□ Remove
			☐ Change
			Add
			□ Remove
			Change
			□ Remove
			Ghange
			AR AP
			Remove T
			□ Remove
			Change
			Add
		<del> </del>	Remove
			Change

D. If amending any other infor		•	•		•
					<del></del>
			<del></del>		<u></u>
<del></del> -			······································		<del></del>
· · · · · · · · · · · · · · · · · · ·	*·				
					<del></del>
<u></u>					
			<del></del>	·	<del></del>
<del></del>				<del></del>	<del></del>
					<del></del>
					<del></del>
			-		<del></del>
·		**************************************		·	
	April 28, 20	115		茅紹	귥
. Effective date, if other than t	idal de apecime una cumiot de prior t	to date of time of those that	n 90 days and 175 c	Majdur to	3,05.0207 (3)(b
Note: If the date inserted in this document's effective date on the	block does not meet the applica Department of State's records.	able statutory filing requ	irements, this dist.	∵्∏ µot be	الغted as the
the record specifies a delay		an effective time,	at 12:01 i.m.	. ஸ். he e	arlier of:
					<u></u>
Dated April 28	2015			,)'>	
· -	MILLIONOR	in in index			
<del></del>	Signature of a member or author	rized representative of a mo	ember		_
Michelle Murgado					
<del></del>	Tunad or prints	d name of signee			_

Page 3 of 3

Filing Fee: \$25.00