p.01

Division of Corporations

Page 1 of 2



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Corporate Filing Menu

Help

06/20/16

COVER LETTER

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TO:	Registration Section
	Division of Corporations

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TAG TRANSPORT LLC

Name of Linuted Liability Cumpany

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	JOSE A QUINTANA		
		Name of Person	
	TAG TRANSPORT LLC		
		Finn/Company	TALL
	2708 BELLWOOD DRIV	E	
		Address	
	BRANDON, FL 33511		 ₩ ₹ D
	• 	City/State and Zip Code	9
	E-mail address: (to be used for future annual report notif	
For further information of	oncerning this matter, please c	all:	
JOSE A QUINTANA		813 7010273	
Name o	[Person	Area Codo Daytino	Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 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 envioased)
Registr Divisio	ING ADDRESS: adon Section in of Corporations	STREET/COURI Registration Section Division of Corpor	n in the second s
P.O. Box 6327 Tallahasseo, FL 32314		Clifton Building 2661 Executive Ce Tallahassee, FL 32	

p.02

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TAG TRANSPORT LLC

(Name of the Limited Liability Company as it now angenrs on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on <u>05/29/2015</u> and assigned Florida document number <u>L15000094710</u>,

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 Limbility Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:	 - 20		
(Principal office address MUST BE A STREET ADDRESS)	 <u> </u>	, -	
	2E	<u> </u>	
Enter new mailing address, if applicable:	ANY O	21	Г
(Mailing address MAY BE A POST OFFICE BOX)	20		$\overline{\mathbf{O}}$
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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:	ADRIAN CORREA RIELO			
New Registered Office Address:	8417 N ARMENIA AVE APT 512			
The Hering of Saller (and was	Enter 1	florida street address		
	тамра	. Florida 33604		
	Cip	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 an 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 heing 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, Signaturs of New Registered Agent

Page 1 of 3

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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

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AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	ADRIAN CORREA RIELO	8417 N ARMENIA AVE APT SI2	Add
		TAMPA, FL 33604	Remove
			Change
			Add
			Remove
			Charles
			O A00
	······		FILED
			C Remove
	- <u></u> .		🗆 Add
			Remove
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			Change

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	TA
	ANASSEE

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

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.

Dated 06-21-16	· · · · · · · · · · · · · · · · · · ·	
	Trath	
	Sendure of a member or authorized representative of a member	
JOSE A QUINTANA		

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00