## 115000095170

(Re	questor's Name)	<del></del>
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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## **COVER LETTER**

TO: Registration : Division of C						
CALAT/ SUBJECT:	AYU TRANSPORTATION SER	VICES, LLC				
SUBJECT:	Name of Lim	ited Liability Company				
	of Amendment and fee(s) are sub pondence concerning this matter	-				
	YOULEN CALATAYU					
		Name of Person	<del></del>			
CALATAYU TRANSPORTATION SERVICES, LLC						
		Firm/Company				
	1615 EUCLID AVE, APT	4				
	Address MIAMI BEACH, FL 33139					
	1.0.1	City/State and Zip Code				
	youlenc@yahoo.com  E-mail address: (	to be used for future annual report no	otification)			
For further information	concerning this matter, please or	ali:				
YOULEN CALATAY	ับ	786 3276689				
Name	e of Person	Area Code Dayti	ime 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

CALATAYU TRANSPORTATION SERVICES, LLC	71	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I.	ny as it now appears on our records.) hability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L15000095170	were filed on <u>06/01/2015</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	7. C. " 1	30 3 C
The new name must be distinguishable and contain the words "Limited Liable	ity Company. The designation "LLC" or the	aboreviation E.C.
Enter new principal offices address, if applicable:		王门
(Principal office address MUST BE A STREET ADDRESS)	•war •	SSE OF THE PROPERTY OF THE PRO
		<u> </u>
Enter new mailing address, if applicable:		TATE
(Mailing address MAY BE A POST OFFICE BOX)		<b>D</b>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		r the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	J. 1
	, Florida	
	('in	Zin 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.

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>	<u>Address</u>	Type of Action
MGR	JANNETT PINERO	838 EAST 21 ST, HIALEAH, FL 3	□ Add
			■ Remove
			Change
MGR	YOULEN CALATAYU	1615 EUCLID AVE, APT 4,MIAN	B Add
		424ch81144124-144-144-144-144-144-144-144-144-	🗆 Remove
			□ Change
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If an effective Note: If the	ate, if other than the date is listed, the date me date inserted in this leffective date on the leffective date.	ust be specific an block does not	nd cannot be pri- meet the appl	or to date of filing icable statutory			) Pursuant		
	specifies a delayed In day after the re			iot an effect	ive time, at	12:01 a.m.	on the ه	earlier	of
. JUNI	E 1 <b>7</b>		2015				SEC	آن س	125
Dated	- · ·		-, -	·			AHE A	F	9.55
	/	XAL.	Anna				SAL	1	f
_		Signature of a	a member or au	thorized represer	ntative of a memb	<del></del>	<u> </u>	PR	Ş
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7	YOULEN CALATAY	7U	V				[0]	بي	

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Filing Fee: \$25.00