# L15006114235

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(Ad	dress)	
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## **COVER LETTER**

	ision of Cor DEPENDA	BLE FREIGHT AND TRANS	SPORTATION LLC.		
SUBJECT:		Name of Lim	ited Liability Company		
he enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.		
lease return	all correspon	ndence concerning this matter	to the following:		
		JESUS J. LOPEZ			
			Name of Person	- 14	
		DEPENDABLE FREIGHT AND TRANSPORTATION LLC.			
			Firm/Company		
	8405 HAMMOCKS BOULEVARD APT.4108				
			Address	·	
		MIAMI. FL. 33193			
			City/State and Zip Code	<del> </del>	
		E-mail address: (	to be used for future annual report notif	fication)	
or further in	oformation co	oncerning this matter, please ca	ail:		
IESUS J. LO	PEZ		305 726-4294		
	Name of	Person	at () Area Code Daytime	e Telephone Number	
Enclosed is a	check for th	e following amount:			
□ \$25,00 F	iling 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:

TO:

**Registration Section** 

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

DEPENDABLE FREIGHT ;AND TRANSPORTATION	ON LLC.	
(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L15000116239	were filed on <u>07/15/2015</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
N/A		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company." the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:		AN 28 AN HASSEE
New Registered Office Address:		18: 10R
New Registered Office Address.	Enter Florida street address	
	, Floric	da

#### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
AMBR	JESUS J. LOPEZ	8405 HAMMOCKS BLVD.	
		APT. 4108	■ Remove
		MIAMI, FL. 33193	☐ Change
	<del></del>		Add
			□ Remove
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			☐ Change

KIND, HAS BEEN UNANIM	10US DECISION TO REMOVE	E JESUS J. LOPEZ FRO	OM THE ABOVE	
MENTIONED LIMITED LIA	ABILITY CORP. AS AN AUTH	ORIZED MEMBER.		
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ctive date, if other than the	date of filing: 12/04/	/ 20/6	(optional)	ant to 605
	ock does not meet the applicable			
intelle 8 effective date off the De	partition of State's records.			
ecord specifies a delaved	effective date, but not an	n effective time, at	12:01 a;m, on th	e earlie
e 90th day after the reco				
JANUARY 04,	2016			
d				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00