L16000054468

(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	=====================================
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S. YOUNG

SECRETARY OF STATES

COVER LETTER

TO:		istration Se ision of Cor			
4 CUD I	·. ECT.	MODEL-PI	LUS TRANSPORTATION LI	MITED LIABILITY COMPANY	
SUBJ	IECT:		Name of Lim	ited Liability Company	
The e	nclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	e return	all correspo	ndence concerning this matter	to the following:	
			JEAN SIMON LAGUERI	RE	
				Name of Person	
			MODEL-PLUS TRANSPO	DRTATION LIMITED LIABILIT	Y COMPANY
				Firm/Company	-1
			137 W	HITBY ST	A
			 		
			DAVENPORT, FL 33897		tification)
			SIMONLAGUERRRE@YA		
For fu	ırther in	nformation co	E-mail address: (oncerning this matter, please c	to be used for future annual report no all:	iffication)
JEAN	I SIMC	N LAGUER	RE	407 860-2422 at ()	
		Name of	f Person		ne Telephone Number
Enclo	sed is a	a check for th	ne following apriount:		
■ S2	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)
		Registra Divisio	ING ADDRESS: ation Section n of Corporations ox 6327	STREET/COUR Registration Sect Division of Corpo Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MODEL DITIE TO ANEDOD TATION LIMITED LIADILITY COMPANY

(Name of the Limited		t now appears on our rec y Company)	cords.)
The Articles of Organization for this Limited Liab Florida document number L16000054468	oility Company were	filed on 03/17/2016	and assigned
his amendment is submitted to amend the follow	ving:		
a. If amending name, enter the new name of t	he limited liability o	ompany here:	
MODEL-PLUS TRANSPORTATION, LLC			
he new name must be distinguishable and contain the wor	ds "Limited Liability Co	mpany," the designation "	LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applical	N/A	\	
Principal office address MUST BE A STREET	ADDRESS)		
	·	•	16
nter new mailing address, if applicable:	N/A	\	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Mailing address MAY BE A POST OFFICE B	<u> </u>		ON THE
			to make
3. If amending the registered agent and/or		address on our reco	ords, enter the name of the
egistered agent and/or the new registered offi-	ce address here:		
Name of New Registered Agent:	SAME AS IN ORIGI	NAL	
New Registered Office Address:	SAME AS IN ORIGI	NAL	
		Enter Florida street ad	ldress
			, Florida
	C	City	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 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
		·	☐ Remove
		-	☐ Change
			□ Remove
			☐ Change
			□ Add
			Remove
			Change
			☐ Add
			Remove
			□ Change
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			Remove
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ctive date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be prior to If the date inserted in this block does not meet the applicate	o date of filing or more than 90 days after filing.) Pursuant to 60 ble statutory filing requirements, this date will not be lis
ment's effective date on the Department of State's records.	, .
ecord specifies a delayed effective date, but not see 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earl
e som day arter the record is medi	
d 08/12 2016	
	- ·
///N/ <i>(/L CLR</i> / L Q)	1

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00