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(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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August 18, 2017

MASAI DIAZ 8213 N 12 TH ST APT A TAMPA, FL 33604

SUBJECT: GO WITH THE FLOW TRANSPORT LLC

Ref. Number: L16000079981

We have received your document for GO WITH THE FLOW TRANSPORT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 117A00017026

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gowith the flow (Name of the Limited Liability Compan (A Florida Limited L	Transport 110
(Name of the Limited Liability Compan (A Florida Limited L	ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L16000079981</u> .	were filed on 04-25-16 and assumed
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liabil	lity company here:
garage state the state of the minice name	St. F
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L,L,C,"
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	6830 E. Broadway Ave
	Tampa f1, 33619
Enter non-mailing address if another bloom	,
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6830 E. Broadway Ave
(Muning namess MAT BE A TOST OFFICE BOA)	744.65 41 33611
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent: UGSE	:
	nia gaona O E. Broadway Ave Enter Florida street address
Tan	10a Florida 33619

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.

 T_{City}

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

Page 1 of 3

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

Title	Name	Address	Type of Action
AMBR	yasenia gaona	6830 E. Broadway x	Ne_D(Add
		Tampa F1 33619	
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The 90th day atted Aug	1/10	Du		d representative	of a marrishur			

Page 3 of 3

Filing Fee: \$25.00