## L16000135783

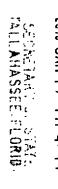
(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone #)	<u> </u>
PICK-UP	☐ WAIT	MAIL.
(Busin	ness Entity Name)	
(Docu	ment Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fili	ing Officer:	

Office Use Only



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## **COVER LETTER**

TO:	Registration So Division of Co		•		جع
			*	•	A BILLY
SUBJ	ECT:		ansport LLC nited Liability Company	·	TO B
		Name of Lin	med Liability Company		エンルー
					36
The er	iclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		93.5
		Ric	ardo Reinier De La F	Rosa Perez	
			Name of Person		
			1H Transport LLC		
			Firm/Company	<u>.</u>	_
			22548 144TH St		
		Address			
			Live Oak, FL 32060		
			City/State and Zip Code		_
			ROSA@YAHOO.COM		
		E-mail address: (	(to be used for future annual r	eport notification)	
For fu	rther information e	oncerning this matter, please c	all:		
	Ricardo	Reinier	at (_ <b>561</b> )	506-9224	
	Name o	d Person	Area Code	Daytime Telephone Number	<u></u>
Enclos	sed is a check for the	ne following amount:			
<b>■</b> \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certifier osed) Certifier	ate of Status &
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	Registration Division of Clifton Bu 2661 Exec	/COURIER ADDRESS: on Section of Corporations ailding outive Center Circle se, FL 32301	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLES OF O	RGANIZATION	
Ol		and assigned
(Name of the Limited Liability Compan (A Florida Limited L.	y as it now appears on our records.) ability Company)	The St.
The Articles of Organization for this Limited Liability Company v	vere filed on	and assigned
Florida document number		<b>V</b> .
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	22548 144TH St	<u></u>
(Principal office address MUST BE A STREET ADDRESS)	Live Oak, FL 32060	
Enter new mailing address, if applicable:	2787 10th Ave N	
(Mailing address MAY BE A POST OFFICE BOX)	Palm Springs, FL 33461	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		e name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<del></del>
	, Florida	
	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
MGR		Ricardo Reinier De La Rosa Perez	🗖 Aðd
		22548 144th St, Live Oak FL 32060	■ Remove
			□ Change
MGR Odalys Perez	2787 10th Ave N, Palm Springs FL 33461	<b>=</b> Add	
		□ Remove	
	<del></del>	Change	
		□ Remove	
		Change	
			<b>_</b>
			Remove
		Change	
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(If an effi Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	Jananuary 11 2019
	Signature of a member or authorized representative of a member
	Ricardo Reinier De la Rosa Perez Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00