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	gistration Section vision of Corporations				
C-1/15 17: EVT	Condo	r Transport, LLC			
SUBJECT:		nted Liability Company			
The enclose	ed Articles of Amendment and fee(s) are sul	omitted for tiling.			
Please retur	n all correspondence concerning this matter	to the following:			
		Gilbert M oreno			
		Name of Person	to the second se		
		Kendall Accounting & Tax			
		Firm/Company			
		11420 N Kendall Dr. Ste 207			
		Address	······································		
	Miami, FL 33176				
		City/State and Zip Code	**************************************		
		qbanpit@hotmail.com			
	E-mail address:	to be used for future annual report notific	cation)		
For further	information concerning this matter, please of	all:			
	Gilbert Moreno	at (7 8 6) 554-969	6		
	Name of Person		Telephone Number		
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	a check for the following amount:		~		
⊠ \$25.00	Filing Fee S \$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:	STREET/COURIE			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Condor Transport, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 12/28/2016 The Articles of Organization for this Limited Liability Company were filed on _____ and assigned L16000233190 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "I imited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

Page 1 of 3

GR = N $MBR = A$	lanager authorized Member		
<u>tle</u>	<u>Name</u>	Address	Type of Action
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(Attach additional sheets, if necessary.)
T
23 PM 1: 00
(optional) date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 le statutory filing requirements, this date will not be listed as th
an effective time, at 12:01 a.m. on the earlier of:
ed representative of a member
Didie Didie Signee

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