

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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D. SCOTT DEC 2 0 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 5, 2018

AMARIS CABALLERO 5642 ROYAL HILLS ST WINTER HAVEN, FL 33881

SUBJECT: ROYAL HILLS TRANSPORT LLC

Ref. Number: L17000002189

We have received your document for ROYAL HILLS TRANSPORT LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 018A00024908 =

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROYAL HILLS TRANSPORT L			
(Name of the Lin	ited Liability Company as it now appears ((A Florida Limited Liability Company)	on our records.)	
ne Articles of Organization for this Limited	Liability Company were filed on 01/04	4/2017	_ and assigned
orida document number L17000002189	 ,		
is amendment is submitted to amend the fo	llowing:		
If amending name, enter the new name	of the limited liability company here	:	
new name must be distinguishable and contain the	words "Limited Liability Company," the desi	gnation "LLC" or the abbr	eviation "L.L.C."
ter new principal offices address, if appl	icable:		
rincipal office address MUST BE A STRE	ET ADDRESS)		
nter new mailing address, if applicable: **Idiling address MAY BE A POST OFFICE**	 E BOX)	.	2019 7
			- T
If amending the registered agent and istered agent and/or the new registered		our records, enter th	e name of the f
Name of New Registered Agent:	Amaris Caballero		2
New Registered Office Address:			
	Enter Florida	i streei address	
		, 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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Alexander Caballero Min	5642 ROYAL HILLS STREET	□ Add
		WINTER HAVEN, FL 33881	
			■ Remove
			Change
AMBR Amaris Caballero	Amaris Caballero	5642 ROYAL HILLS STREET	6
	-	WINTER HAVEN, FL 33881	■ Add
			□ Remove
			Change
MGR	Amaris Caballero	5642 ROYAL HILLS STREET	D. U.
		WINTER HAVEN, FL 33881	
			☐ Remove
			Change
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2018 -
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trsuant to 605:02 I ngt be listed
the earlier

Page 3 of 3

Filing Fee: \$25.00