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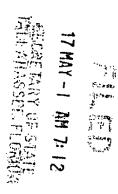
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MAY 0 , 2025 J SHIVERS

COVER LETTER

Division of Corporations	
SUBJECT: Light Roads Transportation 71 LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:	
William Eusebio Name of Person	
3132 W Lambright St # 1007	
3132 W Lambright St # 1007 Address Tampa FL 33614 City/State and Zip Code 1	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
William Fusebio at (813) 270-4920 Name of Person Area Code Daytime Telephone Number	
\mathcal{N}_{i}	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$25.00 Filing Fee & \text{Certified Copy} &	

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>Light Roads Iran</u>	Sportation +1 LLC	
J (<u>Name of the Limited Liabil</u> (A Florid	lify Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability (Florida document number <u>L170009244</u>)	Company were filed on April 26, 26	017 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim Light Roads 71 Trans The new name must be distinguishable and contain the words "Lin	sportation LLC	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDI	RESS)	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		er the name of the new
Name of New Registered Agent:		St. Jan
New Registered Office Address:		The second second
	Enter Florida street address	7 7 7
 -	, Florida	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 Title **Name Address Type of Action** 3132 W Lambright St #1007 William Eusebio Tampa, FL 32614 ☐ Remove ☐ Change AMBR Nancy Eusebio □ Remove ☐ Change □ Add □ Remove ☐ Change _□ Add _□ Remove _□ Change _□ Add □ Remove _□ Change _□ Add □ Remove _□ Change

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If an e	etive date, if other than the date of filing: May 1 2017 (optional) effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list ment's effective date on the Department of State's records.)5,0207 (sted as t
docu	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earl e 90th day after the record is filed.	ier of:
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Page 3 of 3

Filing Fee: \$25.00