L18000078744

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(0	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
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])	Document Number)
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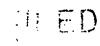


· COVER LETTER

Division of Corporations			
SUBJECT:	H & G TRANSPORT SO	DLUTIONS LLC	<u>. </u>
	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Olvam H. F	Rodríguez	
		Name of Person	····
	H & G TRAN	SPORT SOLUTIONS LLC	
		Firm/Company	
		3111 SW 68 AV.	
		Address	
	Mi	ramar, Fl 33023	
		City/State and Zip Code	
	HGTRAN E-mail address: (SPORT8@GMAIL.COM to be used for future annual report no	otification)
For further information of	concerning this matter, please c	all:	
Olya	am H. Rodríguez	at (_305)331	18616
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for t	he following amount:		
☒ \$25.00 Filing Fee	☐ \$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 Addres		Street Address:	
Registration : Division of C		Registration S Division of Co	
P.O. Box 632	27	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

. ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FD **OF**



LLO C TRANSPORT COLUTIONS LLO	1 11.124 PM 1:00
H & G TRANSPORT SOLUTIONS LLC (Name of the Limited Liability Company as it now appears on (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on <u>03/2</u>	77 2018 and assigned
Florida document number <u>L18000078744</u>	
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 "Limited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
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 recoragent and/or the new registered office address here:	ds, enter the name of the new registered
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	
Enter Florida s	treet address
City:	, Florida
New Registered Agent's Signature, if changing Registered Agent:	гар соне
I hereby accept the appointment as registered agent and agree to act in this capa provisions of all statutes relative to the proper and complete performance of my accept the obligations of my position as registered agent as provided for in Chapbeing filed to merely reflect a change in the registered office address. I hereby company has been notified in writing of this change.	duties, and I am familiar with and ster 605, F.S. Or, if this document is

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>	Name	Address	Type of Action
MGR	William David Lopera		🖾 Add
		3111 SW 68 AV. Miramar, Fl 33023	□Remove
			□Change
secretary	Santos A Castellanos		□Add
		3111 SW 68 AV Miramar, FL 33023	🖾 Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□ Remove
			□Change
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ffectiv	ve date, if other than the date of filing:
ote:	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
ocume	ent's effective date on the Department of State's records.
record Lis file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
13 111	
ated _	AUGUST 18TH . 2020 .
	1) Van Lodon in
	Signature of a member or authorized representative of a member
	Olvam H. Rodríguez

Filing Fee: \$25.00