## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PRIORITY CORPORATE TRANSIT LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	DRITY CORPORATE TRA	
(Name of the Limited I	lability Company us it now for da Limited Liability Com	nppears on our records.)
The Articles of Organization for this Limited Liabi Torida document number	lity Company were filed	onIUNE 28TH, 2018 and assigned
his amendment is submitted to amend the followi	ng:	
A. If amending name, enter the new name of th	e limited liability compa	any here:
The new name must be distinguishable and contain the word	s "Limited Liability Company	the designation "LLC" or the abbreviation L.L.C."
Enter new principal offices address, if applicabl	e: 3343 PO	RT ROYALE DR. S. SUITE 602
Principal office address MUST BE A STREET	TAT TAT	IDERDALE, FL 33308
Enter new mailing address, if applicable:	3343 PO	RT ROYALE DR. S. SUITE 602
Muiling address MAY BE A POST OFFICE BO	FT LAU	DERDALE, FL 33368
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office addr e address here:	ess on our records, enter the name of the n
Name of New Registered Agent:	RUBMARY GOMEZ	
New Registered Office Address:	3343 PORT ROYALE DR	s. s. suite 602
THE WASHINGTON A LINEAR CHANGES	Ei	nter Florida street address
	FT. LAUDERDALE	Florida 33308
	City	Zip Coxle

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

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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	<u>Name</u>	Address	Type of Action
MGR	FRANK COVA	3343 PORT ROYALE DR. S. SUITE 602	D Add
, —	, <del></del>	FT. LAUDERDALE, FL 33308	Remove
			■ Change
MGR	ALBERTO A CALDERON	3343 PORT ROYALE DR. S. SUITE 602	D Add
		FT. LAUDERDALE, FL 33308	□ Remove
			■ Change
MGR	RUBMARY GOMEZ	3343 PORT ROYALE DR. S. SUITE 602	o o o o o o o o o o o o o o o o o o o
•		FT. LAUDERDALE, FL 33308	Remove
			Change
MGR	DAVID FRAIZ	3343 PORT ROYALE DR. S. SUITE 602	On the State of t
		FT. LAUDERDALE, FL 33308	T* D Remova
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	Pal	
Signo	ture of a member or authorized representative of a member	
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