

L180000252091

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LGR TRANSPORT LLC

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8/3/21

H210002924043

COVER LETTER.

TO: Registration Section
Division of Corporations

SUBJECT: LGR TRANSPORT 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:

NORBERTO LOPEZ RODRIGUEZ

Name of Person

Firm/Company

10490 NE 130TH AVE.

Address

FORT MCCOY, FL 32134

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NORBERTO LOPEZ RODRIGUEZ

Name of Person

321 4438428
at ()
Area Code Daytime Telephone Number

Enclosed is a check for the 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 Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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H210002924043

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

LGR TRANSPORT LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/26/2018 and assigned
Florida document number L18000252091

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 designation "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 records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

AMY GARCED

New Registered Office Address:

10490 NE 130TH AVE.

Enter Florida street address

FORT MCCOY

City

Florida

32134

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

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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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	NORBERTO LOPEZ RODRIGUE	10490 NE 130TH AVE.	<input type="checkbox"/> Add
		FORT MCCOY, FL 32134	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	AMY GARCED	10490 NE 130TH AVE.	<input checked="" type="checkbox"/> Add
		FORT MCCOY, FL 32134	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Filing Fee: \$25.00