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### **COVER LETTER**

SUBJECT: High Spe	ed Auto Tra	INSPORT ability Company	LLC	
The enclosed Articles of Amendme	nt and fee(s) are submitted	for filing.		
Please return all correspondence co	ncerning this matter to the	following:		
	Leinier A	YAYIO Name of Person		
Hi	gnspeed	Transper	ort LLC	
_ 4	123 NE 21 S	+ C† Address		
	Homested	FL 330	33	
Hig	hspeed Tro	INSPORT	94 Damail. Cu	m
For further information concerning	this matter, please call:			
Leinier Avo	rujo	at ( <u>786</u> ) <u>4</u> Area Code	93-6954  Daytime Telephone Number	
Enclosed is a check for the following	g amount:			
-	00 Filing Fee &  rtificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	sed) Certified C	of Status &

#### MAILING ADDRESS:

Registration Section

**Division of Corporations** 

TO:

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

Speed AUTO Transport LLC
(Name of the Limited Liability Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on 11/07/2018 and assigned Florida document number <u>L180002.61376</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: High Speed Transport LLC

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: New Registered Office Address: Enter Florida street address

#### 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

<u>Title</u>	Name	Address	Type of Action
AMBR	Erika A. Celorrio	4123 NE 21 S+ CT	D Add
		Homestead, FL 3303	3_TRemove
			Change
			Remove
			Change
			□ Add
			□ Remove
			Change
			D Add
			□ Remove
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			☐ Change
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			□ Remove
			☐ Change

. If amen	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note: If	edate, if other than the date of filing:
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: Oth day after the record is filed.
Dated _	2/10 2018
	Signature of a member or authorized representative of a member
	Leinier Araujo. Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00