1/4/2021

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210000028943)))



H210000028943ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from th	iis pi
Doing so will generate another cover sheet.	

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062
Phone : (323)962-8000
Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NMMS TRANSPORT, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00



Electronic Filing Menu

Corporate Filing Menu

Help

3

From: Meghan Smith

COVER LETTER

	istration Sec ision of Corp	CUVII					
CISD IE/T.	NMMS TR.	ANSPORT, LLC					
SUBJECT:Name of Limited Liability Company							
The enclosed	l Articles of a	Amendment and fee(s) are sub	nitted for filing.				
Please return	rall correspo	ndence concerning this matter t	to the following:				
		Cheyenne Moseley					
			Name of Person				
		Legatzoom.com, Inc.					
			Firm/Company				
		101 N Brand Blvd 11th Fl					
			Address				
		Glendale, CA 91203					
		Enrique@itsmontsc.com					
		E-mail address: (t	o be used for future annual report to	ofification)			
For further i	nformation c	oncerning this matter, please or	all:				
Cheyenne N	Aoseley		800 773-0888 at ()				
-	Name o	l'Person	at () Area Code Days	ime Telephone Number			
Enclosed is	a check for th	ne 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/COURIER ADDRESS:

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

From: Meghan Smith

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NMMS TRANSPORT, LLC		<u></u>
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our records.) ability Company)	 -
The Articles of Organization for this Limited Liability Company of Florida document number <u>L18000274687</u> .		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		200
(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 of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:		enter the name of the new
	Enter Floridastreet address	
	Florid	daZipCode
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pheing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and i provided for in Chapter 605, F.S	r am familiar with and S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

From: Meghan Smith

Page 5 of 6

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>	Address	Type of Action
AMBR	GARCIA, LUIS E		
		7931 East Dr. Apt 204 North Bay Village, FL 33141	■ Remove
			☐ Change
			Add
			Remove
			Change
			Remove
			Change
			Remove
			Change
			D Add
			Remove
			☐ Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			Remove
			Change

Page 3 of 3

Filing Fee: \$25.00