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.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : A & L CARRIER SERVICES INC.

Account Number : I20110000033 : (786)360-2879 Phone Fax Number : (786)362-5270

**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 CORDOVI FDEZ TRANSPORT LLC

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K. SALY

MAR 29 2022

COVER LETTER

	CORDOVI	FDEZ TRANSPORT LLC		
TO: Registration Section Division of Corporations SUBJECT: CORDOVI FDEZ 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: WILIAM CORDOVI FERNANDEZ Name of Person CORDOVI FDEZ TRANSPORT LLC FinnyCompany 144 NW 18TH AVE Address MIAMI FL 33125 City/State and Zip Code INFO@ALCARRIERSERVICES.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: INFO@ALCARRIERSERVICES.COM Name of Person Acea Code Daytime Telephone Number Einclosed is a check for the following amount: E \$25.00 Filing Fee Certificate of Status Certificate Of Status Mailing Address: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 2415 N. Montroe Street, Suite 810				
The enclosed	Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		WILIAM CORDOVI FER	NANDEZ.	
			Name of Person	
		CORDOVE FDEZ TRANS	PORT LLC	
		-1	Firm/Company	
		144 NW 18TH AVE		
			Address	
		MIAMI FL 33125		
			City/State and Zip Code	
				(ficatius)
r cl i	6			
For further in	iormation co	ncerning inis matter, prease es		
INFO@ALC	ARRIERSE	RVICES.COM	at ()	
	Name of	Person	Area Code Daytin	e Telephone Number
Enclosed is a	check for the	following amount:		
≘ \$25.00 F	iling Fee	_	Certified Copy	Certificate of Status & Certified Copy
Reg Div P.O	gistration S vision of Co b. Box 6327	ection orporations 7	Registration Se Division of Co The Centre of	rporations Fallahassee be Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILEL
1922 MAR 28 PM
ALLAHASSLE TLORID

(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 193728/2022 and assigned clorida document number 19000056056. LIQ000056-056 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 "LLC." The new principal offices address, if applicable: 13435 SW 128TH ST UNIT 106 MIAMI PL 33186 The mending address MUST BE A STREET ADDRESS! MIAMI PL 33186 The mending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered Agent: Name of New Registered Agent: New Registered Office Address: 1343 SW 128TH ST UNIT 106 Enter Florida street address MIAMI — Priorida 33125 MIAMI — Priorida 33125 MIAMI — Priorida 33125 MIAMI — Priorida 33125	CORDOVI FDEZ TRANSPORT LLC			
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 "LLC." 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 address here: Name of New Registered Agent: New Registered Office Address: 1343 SW 128TH ST UNIT 106 MIAMI FL 33186 Enter Florida street address MIAMI Florida 33125	(Name of the Limited Lie (A Fl	ibility Compai orida Limited L	ny as it now appears on our re liability Company)	cords.)
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The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Inter new principal offices address, if applicable: 13435 SW 128TH ST UNIT 106	This amendment is submitted to amend the following	R.		
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Inter new principal office address MUST BE A STREET ADDRESS) MIAMI FL 33186 Mailing address, if applicable: Miami FL 33186 Miami FL 33186	he new name must be distinguishable and contain the words	'Limited Liabil	ity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable: MIAMI FL 33186				
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Mailing address MAY BE A POST OFFICE BOX) MIAMI FL 33186 MIAMI FL 33186 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered address here: Name of New Registered Agent:	Sutar now mailing address if applicable:			
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: 1343 SW 128TH ST UNIT 106	(Mailing address MAY BE A POST OFFICE BOX)		MIAMI FL 33186	
New Registered Office Address: Enter Florida street address MIAMI, Florida 33125	Name of New Registered Agent:	<u>re</u> :		nter the name of the new regist
MIAMI, Florida 33125 City Zip Code	New Registered Office Address:			
City Zip Code	N	памі	<u> </u>	_, Florida 33125
	-		City	Zip Code
		ant and are	pe to act in this canacity	. I further agree to comply with

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	<u>Address</u>	Type of Action
MGR	Wiliam Cordovi Fernandez	13435 SW 128TH ST UNIT 106	\\ \exists Add
		MIAMI FL 33186	□Remove
			(I) Remove
-			Change 22
			Remove
			[] Change
			□Add
			Remove
			Change
			Remove
			□Change
			Remove
			Change

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Effective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing) Pursuant to 605,0207 (3 date; lift the date inserted in this black does not meet the applicable statutory filing requirements, this date will not be listed as infocument's effective date on the Department of State's records. Incord specifies a delayed effective date, but not un offective time, at 12:01 a.m. on the earlier of. (b). The 90th day after the dis filed. MANCH 28 Signature of a member or authorized representative of a member. WILLIAM CORDOVI FIERNANDEZ			
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Filing Fee: \$25.00