L19000090394

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-L	JP WAIT MAIL
· · · · · · · · · · · · · · · · · · ·	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	ns to Filing Officer:
	1 /22

Office Use Only

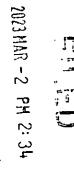


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February 2, 2023

JOSE R RIVERA PEREZ 6811 SCENIC DR. APOLLO BEACH, FL 33572

SUBJECT: JRP TRANSPORT LLC Ref. Number: L19000090394

We have received your document for JRP TRANSPORT LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file the 2020 annual report. The entity must be reinstated before this document can be filed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers Regulatory Specialist II

Letter Number: 123A00002525

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		COVER LETTER			
TO: Registration Se Division of Cor					
		ANSPORT LLC			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	JOSE R RIVERA-PEREZ				
		Name of Person			
	JRP TRANSPORT LL	C			
		Firm/Company		20)
	6811 SCENIC DR			2023 MAX	> 3 LI MI
	<u></u>	Address		,	1
	APOLLO BEACH, FL 33:	572			PH
		City/State and Zip Code			.∵
	JOSERIVERACDL@YAH			• • • • • • • • • • • • • • • • • • • •	ဍ
		to be used for future annual report no	шсаноп)		
For further information c	oncerning this matter, please c	all:			
JOSE R RIVERA-PERI	EZ	813 573-8480 at ()			
Name o	f Person		me Telephone Number		
Enclosed is a check for the	he following amount:				
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	
Mailing Addres Registration 9		<u>Street Address:</u> Registration S			
Division of C P.O. Box 632		Division of Co The Centre of			
Tallahassee, l			oe Street, Suite 8	10	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JRP TRANSPORT LLC				AAR E
(Name of the Limit	ted Liability Company (A Florida Limited Lia	v as it now appears ability Company)	on our records.)	2
The Articles of Organization for this Limited L Florida document number L19000090394	iability Company w	vere filed on 04/0	2/2019	and assigned 2:
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	of the limited liabili	ity company her	<u>·e</u> :	
JRRP TRANSPORT LLC			<u></u>	
The new name must be distinguishable and contain the	words "Limited Liability	y Company," the de	signation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	6811 SCENIC D	R, APOLLO BEAC	CH, FL 33572
(Principal office address MUST BE A STREE	ET ADDRESS)		<u> </u>	
		CON SCINIC D	R, APOLLO BEAC	CM E1 23572
Enter new mailing address, if applicable:		6811 SCENIC D	R, APOLLO BEAC	-
(Mailing address MAY BE A POST OFFICE	BOX)			
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office ac ess here:	ddress on our re	cords, <u>enter the </u>	name of the new registered
Name of New Registered Agent:	JOSE R RIVERA-PEREZ			
New Registered Office Address:	6811 SCENIC D	PR		
New Registered Office Paddess.		Enter Flori	da street address	
	APOLLO BEAC	CH	, Florid:	a ³³⁵⁷²
		City	, ,//	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

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
MGR	JOSE R RIVERA-PEREZ	6811 SCENIC DR. APOLLO BEACH, FL 33572	🗃 Add
			□Remove
			□Add
			20239ee 13 1 1
			⊒ □Remove
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(If an ef) Note:	ive date, if other than the date of filing: 11.03-27 (optional) bective 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 605.0 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed tent's effective date on the Department of State's records.	
he recor ord is ti	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after led.	the
Dated	NOVEMBER - 08 2022 Signature of a member of a member	
	\mathcal{R}_{I}	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00

Typed or printed name of signee