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Special Instructions to Filing Officer:	\neg

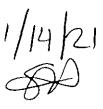




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COVER LETTER

`TO:

TO: Registratio Division of	n Section Corporations	•	
CLUB BRIGHT	DIMENTION TRANSPORT LLC	,	
SUBJECT:	Name of Li	mited Liability Company	
The enclosed Article	es of Amendment and fee(s) are su	abmitted for filing.	
Please return all corr	respondence concerning this matte	er to the following:	
	JORGE L DANTIN		
		Name of Person	
	NEW DIMENTION TRA	ANSPORT LLC	
		Firm/Company	
	26400 SW 146 CT # 308		
		Address	
	HOMESTEAD, FL 3303	2	
	MORALES.DUNIA@YA	City/State and Zip Code .HOO.COM	
	E-mail address:	(to be used for future annual report noti	ication)
For further informati	ion concerning this matter, please	call:	
JORGE L DANTIN		786 230-4483	
Na	ime of Person	Area Code Daytim	e Telephone Number
Enclosed is a check	for the following amount:		- 2
■ \$25.00 Filing Fo	ee S30 00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed)
Division (P.O. Box	on Section of Corporations	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	ction ————————————————————————————————————

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NEW DIMENTION 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 $\frac{04/25/2019}{2}$ and assigned Florida document number $\frac{L19000112828}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NEW DIMENSION 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	<u>Address</u>	Type of Action
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			□Remove
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			Remove
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