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COVER LETTER

	Registration Sect Division of Corp				
01101110	- AD	UV TRAVISDO	RT L	LC	
SUBJEC	:1: <u></u>	M.Y TRANSPO Name of Limit	ed Liability Cor	npany	
The enclo	osed Articles of A	mendment and fee(s) are subn	nitted for filing	ļ.	
Please ret	turn all correspon	dence concerning this matter t	o the following	ÿ :	
		Jose Luis	Pagan Name of I	⁾ erson	
		ADMY T	PANSFOR Firm/Cor	T (C.C.	
		129 Hidden Spi	nngs C. Addre	11 /e	
		Kissimmee A JPagan 855 T He-mail address: (1	- (34 City/State and	743 Zip Code	
		JPagan 855 E-mail address: (1	o be used for fur	no. / COM ure annual report notifi	cation)
For furth	er information co	ncerning this matter, please ca	in:		
<u></u> Jo	se Pagen Name of	Person	at (<u>\(\frac{\fir}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fir}{\fir}}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fir}{\fir}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\</u>	Code Daytime	396 Telephone Number
Enclosed	d is a check for the	e following amount:			
\$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certifie	filing Fee & d Copy at copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Division P.O. Bo	NG ADDRESS: ation Section in of Corporations ox 6327 ssee, FL 32314	*	Page 15 STREET/COURING Registration Section Division of Corpora Chifton Building 2661 Executive Cerual Tallahassee, FL 323	n ations nter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Lia	ANS POTT LLC. ability Company as it now appears on a brida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Florida document number <u>L 1900013736</u>	y Company were filed on OS	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the l	limited liability company here:	
The new name must be distinguishable and contain the words "		ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2	T 11-17
B. If amending the registered agent and/or re registered agent and/or the new registered office a		r records, enter the name of the new
		·
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida si	reet address
_	41.	, Florida Zin Code
	City	гір Соле

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	Corner I. Cajigas	129 Hidden Springs Coule	BAdd
		Kissimmee Fl. 34743	Remove
		 	Change
			Add
		14.34.1	Remove
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			Add
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			Change

(If an e Note:	tive date, if other than the date of filing:
the re	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	August 21 2019
	Supraturif of a member or authorized representative of a member
	Jose Curs Pager Typed or printed name of signee
	JOSE Cuis Yappa

Page 3 of 3

Filing Fee: \$25.00