119000154579

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(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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2024 DEC 27 PM 1: 26 SECRETARY OF STATE

COVER LETTER

TO: Registration S Division of Co			
	RANSPORTATION, LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	f Amendment and fee(s) are subi	nitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	BEKNAZAR MNEGLIMA	AMATOV	
		Name of Person	
	FOUR J TRANSPORTATI	ON, LLC	
		Firm/Company	
	2100 MANCHESTER ROA	AD SUITE 160	
		Address	
	WHEATON, IL 60187 US		
		City/State and Zip Code	
	fourjtransportation@gmail.c	•	
		o be used for future annual report notification)	
For further information	concerning this matter, please ca	ill:	
BEKNAZAR MENGLI	IMAMATOV	773 799-4276	
Name	of Person	at () Area Code Daytime Telephone Number	
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Street Address: Registration Section	and the contract of the contra
Mailing Addre Registration Division of P.O. Box 63	Section Corporations		T T

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EQUID LTD ANDDODTATION LLC

company has been notified in writing of this change.

FOOR J TRANSFORTATION, LLC	 		
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our rec liability Company)	ords.)	
The Articles of Organization for this Limited Liability Company Florida document number L19000154579			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "l	LLC" or the abbreviation "LLLC."	
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 a agent and/or the new registered office address here:	address on our records, <u>en</u>	ter the name of the new registers	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street ad	ldross	
	 City	, Florida	
New Registered Agent's Signature, if changing Registered Agent:	·		
I hereby accept the appointment as registered agent and agro provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	ee to act in this capacity.	I further agree tercompewith the and I am familiar with and 105, 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 liabilities

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	MEUS, JEAN-CLAUDE	1800 NE 2ND CT	
		BOYNTON BEACH, FL 33435	≡ Remove
			□Change
MGR	MENGLIMAMATOV, BEKNAZAR	4712 KEEL CT APT 2B,	■Add
		LISLE IL 60532	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			•
			Add 2021 DEC 27 SM 1: 26 SECHETARY Change S TANDAM SSEC FLORED Remove

				
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fective date, if other than the da	ate of filing:	(optio	onal)	
an effective date is listed, the date must boote: If the date inserted in this blocknownent's effective date on the Department.	k does not meet the applicabl			
record specifies a delayed effective of			20.	
ecord specifies a delayed effective ϵ is filed.	late, but not an effective time	, at 12:01 a.m. on the earlier of: (b	The 90th day after the	-1:
			C 2	<u></u>
			SEC -1	FT
DECEMBER 12TH	2024		က်ဝ ဘာ	1
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	2024 Lean · Classian contact of a member or authorize	de Meuc	PH 1: 26 OF STATE -ELFLORIO	

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