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(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	WAIT	MAIL
(Bt	usiness Entity Name)	
(De	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

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COVER LETTER

C& R TI SUBJECT:	RANSPORTATION LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Roberto Machado		
		Name of Person	
	Simplex Group		
		Firm/Company	
	Name of Limited Liability Company CAmendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Roberto Machado Name of Person Simplex Group Firm/Company 7500 NW 52ND ST, STE 100 Address MIAMI, FL 33166 City/State and Zip Code processingpermits@simplexgroup.net 12-mail address: (to be used for future annual report notification) concerning this matter, please call: at (305		
		Address	·
	City/State and Zip Code processingpermits@simplexgroup.net		
	processingpermits@simplex	Name of Person Firm/Company , STE 100 Address City/State and Zip Code simplexgroup.net dress: (to be used for future annual report notification) lease call:	
	E-mail address: (to be used for future annual report notifi	cation)
For further information	n concerning this matter, please ca	all:	
Roberto Machado		at ()	
Nan	ne of Person	Area Code Daytime	Telephone Number
Enclosed is a check fo	or the following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

C& R TRANSPORTATION LLC

(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)	ars on the records
The Articles of Organization for this Limited Liability Company were filed on	SECRETARY OF STATE
Florida document number L19000163559	•
nis amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: & R TRANSPORTATION LLC e 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: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable:	
A. If amending name, enter the new name of the limited liability company h	<u>iere</u> :
C & R TRANSPORTATION 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 or registered agent and/or the new registered office address here:	on our records, enter the name of the ne
Name of New Registered Agent:	

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Florida

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	Address	Type of Action
			Add
			Remove
			Change
			Add
		□ Remove	
			Change
		Remove	
		□ Change	
		□ Remove	
			Change
			□ Remove
			Change
			Remove
			Change

Effective date, if other than the date of filing:	
Effective date, if other than the date of filing:(optional) (If 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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	
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	to 605,0207 be listed as
ne record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the The 90th day after the record is filed.	earlier of
Dated, 2019	
Conce Yung	
Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00