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DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDS

2020 JAN 10 AM 7: O

FILED

FEB 0 8 2020 S. YOUNG

COVER LETTER

**O: Registration Section Division of Corporations
SUBJECT: Anchor Transportaion UC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jose Gonzalo Garcia Name of Person
Firm/Company
2037 Fill more Street Appt 8 Address
Hollywood Fl 33020 City/State and Zip Code An Chor transpor tation/LC@gmail.com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (561) 672 4409 Area Code Daytime Telephone Number
sinclosed is a check for the following amount: \$\sqrt{\$25.00}\$ Filing Fee \$\sqrt{\$30.00}\$ Filing Fee & \$\sqrt{\$55.00}\$ Filing Fee & \$\sqrt{\$60.00}\$ Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) \$\sqrt{\$60.00}\$ Filing Fee, Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

			IN THE PARTY OF TH	~ 73
(<u>Name of the Limited Liab</u> i (A Flori	<u>lity Company as it now a</u> da Limited Liability Comp	ppears on our records.) any)	JAN I	
The Articles of Organization for this Limited Liability Florida document number <u>LIGOOISO74</u> This amendment is submitted to amend the following:		n 07-15-7	O STATE FLORIES	ignFdT
A. If amending name, enter the new name of the lir	nited liability compar	ny here:		
The new name must be distinguishable and contain the words "Li Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD		the designation "LLC" or t	he abbreviation "L.	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	203 Ap	7 Fillmore pt 8 Hollyu 33020	Street wood Fl	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		s on our records, <u>er</u>	ter the name	of the new
Name of New Registered Agent: New Registered Office Address:	50 Gunzal 137 Fill MOL	O Garcia 10 St reet A or Florida street address	pp+8	
_ldt	illy wood City	, Florida	a <u>33020</u> Zip Code	<u> </u>

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 amonding 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			Add
			Remove
			□ Change
HBR.	JOSE Gonzalo Garcia	2037 Fillmore St Appt 8	🗹 Add
		Hallywood FI 33020	□ Remove
	^		□ Change
7	Sancutha Nicole Wahlenberg	14831 SW 50th Tek.	(DXAdd
	wantenberg	Miami, FL 33185	Remove
			Change
			Remove
			Change
			□ Add
			□ Remove
			Change
			□ Add
			_□ Remove
			□ Changa

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Transforma
Transfering full Ownership to Jose gonzalo Garcia
Who is also now President/owner of
^
Ancher TrunsPertain UC.
I Yinnin Chara will was Snow and art as
treasurer on any document Such as Sun Biz.
TICOLOGO CITATION SOCIAL STATE OF THE STATE
E. Effective date, if other than the date of filing: 19.19 (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 to 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated <u>January</u> 3rd . 2020.
Signature of a member adauthorized representative of a member
Yinnin Chacos
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00