

L19060213737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

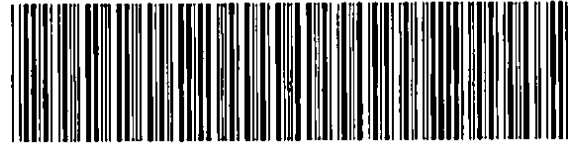
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTRATION DIVISION
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: E.N.P.K. Transport LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Enis Hadzic
Name of Person

E.N.P.K. Transport LLC
Firm/Company

704 Jewell Street
Address

Fruitland Park, FL 34731
City/State and Zip Code

enis.hadzic1@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enis Hadzic at (860) 796-0961
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

E.N.P.R. 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 6/8/2020 and assigned Florida document number L19000213737.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

E.N.P.R. 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)

704 Jewell Street
Fruitland Park, FL 34731

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

"Same As Above"

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:

Enis Hodzic

New Registered Office Address:

704 Jewell Street
Enter Florida street address
Fruitland Park Florida 34731
City Zip Code

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 add or removed from our records:

MGR = Manager
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------------------------------|--------------------------|--|
| <u>MGR</u> | <u>Enis Hadzic</u> | <u>704 Jewell Street</u> | <input checked="" type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change |
| <u>AMBR</u> | <u>Enis Hadzic</u> <u>Hadzic</u> | <u>704 Jewell Street</u> | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change |
| <u>MGR</u> | <u>Kimberly Castagno</u> | <u>704 Jewell Street</u> | <input type="checkbox"/> Add |
| | | | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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