

L19000217020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

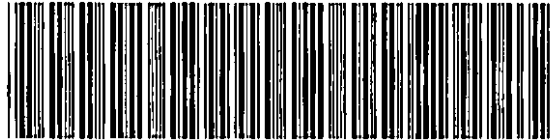
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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D. BRUCE  
SEP 11 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Mister Papi's Transport LLC  
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:

Freddie R Patterson  
Name of Person

MISTER PAPI'S TRANSPORT LLC  
Firm/Company

2156 Featherwood Dr E  
Address

Atlantic Beach, FL 32233  
City/State and Zip Code

Mimi2776@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Freddie R Patterson JR at ( 904 ) 322-4551  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

XX 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

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TALLAHASSEE, FL

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

Mister Papi's 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 8/26/19 and assigned Florida document number L19000217020.

This amendment is submitted to amend the following:

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

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)

2156 Featherwood Dr. E  
Atlantic Beach FL 32233

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2156 Featherwood Dr. E  
Atlantic Beach FL 32233

**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:

New Registered Office Address:

Enter Florida street address

Florida

City

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**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>	<u>Address</u>	<u>Type of Action</u>
MGR	Freddie R Patterson JR	2156 Featherwood Dr E	<input checked="" type="checkbox"/> Add
		Atlantic Beach, FL 3223	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Tracy Huertas - Agosto	2156 Featherwood Dr. E	<input checked="" type="checkbox"/> Add
		Atlantic Beach FL 32233	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Sandra Patterson	2156 Featherwood Dr E	<input checked="" type="checkbox"/> Add
		Atlantic Beach FL 32233	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Alexus Guillory	2156 Featherwood Dr E	<input checked="" type="checkbox"/> Add
		Atlantic Beach FL 32233	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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CLERK OF STATE  
TALLAHASSEE, FL

2020  
SECRET

(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 405.02074(b)

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SECRETARY OF STATE  
TALLAHASSEE, FL

X Dated July 17<sup>th</sup>, 2020

**Freddie R Patterson Jr**  
Typed or printed name of signee

**Filing Fee: \$25.00**