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(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: Drec	t Transport	H Removal -	Services 11c
The enclosed Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	dence concerning this matter	to the following:	
	Steve Yi	S Name of Person	
	Direct Tra	nsport to Rem	oval Services
	667 Whispe	er Cove Court	· · · · · · · · · · · · · · · · · · ·
	Dynedin, Fl	. 3469 8 City/State and Zip Code	
	directorans	ortservices Ic	woutlook.com
For further information co	ncerning this matter, please ca	all:	
Steve y	Person	at (727)754-5 Area Code Daytims	2007 e Telephone Number
Enclosed is a check for the	e 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 Taliahassee, 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

Direct Transport to Removal Services 1/C

(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 Florida document number	ility company here:
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	667 WhisperCove Court Dunedin, Fl. 3469 X
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, enter the name of the new registered
Name of New Registered Agent: Steve	- Yinger
New Registered Office Address: 667 L	Thisper Cove Court Enter Florida street address
Duned:	City, Florida F1. 34698 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 added or removed from our records:

MGR = Manager

AMBR =	Autho	rized	Membe	:1
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<u>Title</u>	Name	Address	Type of Action
mgr	John Blasdeo		□Add
		667 Whisper Cove Cour	+ De Remove
			Change
			□Add
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			Change
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effective date is listed, th	ne date must be specific	c and cannot be price	or to date of filing o	r more than 90 day	s after filing.) Pr	irsuant to 605.02
<u>te:</u> If the date inscried	in this block does n	not meet the appli	icable statutory fi	ling requiremen	ts, this date wil	I not be listed
ument's effective date	on the Department	of State's record	S.			
cord specifies a delaye	d effective date, but	not an effective	time, at 12:01 a.i	n. on the earlier	of: (b) The 9	Oth day after th
s filed.						202
						2022 JUL
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