L20000020851

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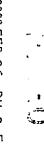


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COVER LETTER

TO:	Registration Se Division of Corp			
CHERT		wing Services LLC		
SUBJEC	<u> </u>	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	etum all correspo	ndence concerning this matter	to the following:	
		David J Gimenez		
			Name of Person	
		David Gu	mene?	
			Firm/Company	
		1101 Miranda Lane Suite	131	
			Address	
		Kissimmee, FL 34741		
			City/State and Zip Code	
		407transportationfl@gmail.		
		E-mail address: (to be used for future annual report notif	lication)
For furth	ner information co	oncerning this matter, please c	all:	
David J	Gimenez		407 300-1062 at ()	
	Name of	f Person	Area Code Daytime	e Telephone Number
Enclosed	d is a check for th	ne following amount:		
■ \$ 25.	.00 Filing Fee	S30.00 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 Addres Registration S		Street Address: Registration Sec	ction
	Division of C		Division of Cor	
	P.O. Box 632	7	The Centre of T	allahassee
	Tallahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited 1	ny as it now appears on our records.)	
(A Florida Limited 1	Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 01/14/2020	and assigned
Florida document number L20000020851		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1101 Miranda Lane Suite 131	7.020 F
Principal office address MUST BE A STREET ADDRESS)	Kissimmee, FL 34741	EB ::
	<u> </u>	26 1
Enter new mailing address, if applicable:	1101 Miranda Lane Suite 131	5.
Mailing address MAY BE A POST OFFICE BOX)	Kissimmee, FL 34741	:=:: 5
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the n</u>	ame of the new register
Name of New Registered Agent:	U.S (**)	
New Registered Office Address:		<u></u>
	Enter Florida street address	
	, Florida	
	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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Liza M Trinidad	2164 Crosston Circle Orlando, FL 32824	■Add
			□Remove
			□Change
		****	🗆 Add
			□Remove
			□ Change
		 	□Add
			□Remove
			□Change
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			□Remove
			□Change
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			□Remove
			□Change

. II an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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lf an ef Note:	tive date, if other than the date of filing:
rd is f	
Dated	David Gineral Signature of a member or authorized representative of a member
	David Ginerer
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	Typed or printed name of signee