# 

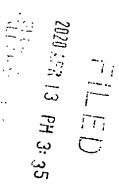
(Red	questor's Name)	
(Add	dress)	
(Add	dress)	<u></u> .
(City	//State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



900342150479

03/16/20--01027--024 \*\*25.00



APR 1 3 7020

I ALBRITTON

### **COVER LETTER**

TO:	Registration So Division of Cor		· · ,			
SUBJEC		insport LLC				
SOBJEK	<u></u>	Name of Lin	ited Liability Company			
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
		Denise Gutierrez-Steiner				
			Name of Person			
		DOT Carrier Solutions Inc				
			Firm/Company			
	2555 NW 102 Ave., Suite #110					
		Address				
		Doral, FL 33172				
		City/State and Zip Code				
		dotcarriersolutions@yahoo.	com to be used for future annual report no	titiestian)		
For furth	er information c	oncerning this matter, please c		in carron,		
Denise (	Intierrez-Steiner		786 608-7237			
	Name o	f Person		ne Telephone Number		
Enclosed	l is a check for th	ne following amount:				
<b>≡</b> \$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 Addres Registration S Division of C	Section	Street Address: Registration Se Division of Co			

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

2020 APR 10 ATTH: ST

## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 30, 2020

DENISE GUTIERREZ-STEINER DOT CARRIER SOLUTIONS INC 2555 NW 102 AVE - STE. 110 DORAL, FL 33172

SUBJECT: JAX CAR TRANSPORT LLC

Ref. Number: L20000022088

We have received your document for JAX CAR TRANSPORT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P18000061984 - PRO CARRIER CORP.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 120A00006925

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 3/11/20 Florida document number  $\underline{^{L20000022088}}$ 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 "LLC." 10919 Hoof Print Drive Enter new principal offices address, if applicable: Jacksonville, FL 32257 (Principal office address MUST BE A STREET ADDRESS) 10919 Hoof Print Drive Enter new mailing address, if applicable: Jacksonville, FL 32257 (Mailing address MAY BE A POST OFFICE BOX) 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: Lazaro Alberto Gonzalez Escandon Name of New Registered Agent: 10919 Hoof Print Drive New Registered Office Address: Enter Florida street address Jacksonville City

#### New Registered Agent's Signature, if changing Registered Agent:

Jax Car Transport LLC

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 adde or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title	Name	Address	Type of Action
P	Francisco J Jolly Sobrino	10919 Hoof Print Drive	
		Jacksonville, FL 32725	■Remove
			(☐Change
MGR	Lazaro Alberto Gonzalez Escandon	10919 Hoof Print Drive	■Add
		Jacksonville, FL 32257	[]Remove
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□ Change
			🗀 Add
			□Remove
			□Change

(If an ei Note:	tive date, if other than the date of filing:  [Optional]  (optional)  (iffective 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 (3)  (if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
he reco ord is f	ord 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 filed.
	March 20 2020
Dated	
Datec	Signature of a member or authorized representative of a member