12/20/21, 1:01 PM

## Plorida Department of State

Division of Corporations Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:					2021 DEC 20
	Division of Corporations Fax Number : (850)617-6	5383			<u>'</u>
From:	Assessed Mana DECISTERS	D ACCUTE INC	^		AD 10
	Account Name : REGISTERED Account Number : I200900000	081	- •		•
	Phone : (307)200-2 Fax Number : (855)330-1	2803			
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Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## TRANSFER COACH 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 Con	npany were filed on 03/1	8/20	and assigned	_
Florida document number L20000084991				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	d liability company here:			
The new name must be distinguishable and contain the words "Limited	d Liability Company," the desig	nation "LLC" or the abl	oreviation "L.L.C."	-
Enter new principal offices address, if applicable:				-
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>		<u> </u>	-
			<del></del>	-
Enter new mailing address, if applicable:			.,	_
(Mailing address MAY BE A POST OFFICE BOX)				
				-
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	office address on our reco	rds, <u>enter the nam</u>	e of the new registe	<u>ered</u>
Name of New Registered Agent:				_
New Registered Office Address:				
New Registered Office Address.	Enter Florida	street address		-
	-	, Florida	21 e2. d	_
New Registered Agent's Signature, if changing Registered A	•		Zip Code	
		anim I faethar am	raa ta wanalo with	cho
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	aplete performance of my nt as provided for in Cha	duties, and Lam for pter 605, F.S. Or,	amiliar with and if this document is	

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

Title	<u>Name</u>	Address	Type of Action
AMBR	ERIC ADLER	2880W Oakland Park Blvd	 □Add
		Suite 225C	i <b>X</b> Remove
		Oakland Park, FL 33311	
			□Add
			□Remove
			□Change
			□Add
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(If an effective date is listed, the date Note: If the date inserted in th	the date of filing:  must be specific and cannot be prior to date of filing or more than 90 s block does not meet the applicable statutory filing requirer to be Department of State's records.	(optional) I days after filing.) Pursuant to 605.0207 (3 ments, this date will not be listed as the
ne record specifies a delayed efford is filed.	etive date, but not an effective time, at 12:01 a.m. on the ear	lier of: (b) The 90th day after the
Dated 12/20	2021	
Morgan (	Signature of a member or authorized representative of a member	her
•	Signature of a member of authorized representative of a member	<b>Æ</b> I
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Filing Fee: \$25.00