K20000) 117262
(Requestor's Name) (Address) (Address)	500375559065
(City/State/Zip/Phone #)	10/26/2101010017 ++25.00
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Signature	
Office Use Only	
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COVER LETTER

TO: Registration Section Division of Corporations

North East Transportation LLC

SUBJECT: _____

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:

Jose Molina
Name of Person
North East Transportation
FinarCompany
PO Box 442314
Address
Jacksonville , FL 32222
City/State and Zip Code
netfle@yahoo.com
E-mail address. (to be used for future annual report notification)
For further information concerning this matter, please call:

Jose Molina 787 6283835 at (____) Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

Certificate of Status

 E) \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed)

...

<u>Mailing Address:</u> 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	insportation LLC	2021 GEC 13	PM 2: 31
(<u>Name of the Limited Liability Comp</u> (A Florida Lunited	<u>Dany as it now appears</u> [Liability Company]	on our records.)	
The Articles of Organization for this Limited Liability Compan		4/30/2020.1	and assigned
Florida document number L20000117262			
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited lial</u>	<u>bility company her</u>	e:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the des	ignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8780 Nomad Rd		
(Principal office address MUST BE A STREET ADDRESS)	ESS) Jacksonville, FI 32220		
Enter new mailing address, if applicable:	PO Box 442314		
Mailing address MAY BE A POST OFFICE BOX)	Jacksonville, FL32	222	
		<u></u>	
B. If amending the registered agent and/or registered office :	address on our reco	ords, <u>enter the na</u>	me of the new regist
gent and/or the new registered office address here:			
Name of New Registered Agent:	Jose Me	olina	
New Registered Office Address:		ng BIvd #89	
The registered office Address.	······································	street address	
	Jacksonville		30044
	City	, Florida _	Zıp 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. Thereby confirm that the limited liability company has been notified in writing of this change.



If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

• .

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jose Molína	7350 Blanding Blvd #89	
		Jacksonville FI 32244	
MGR	Jesus Pimienta Porra	8780 Nomad RD	
		Jacksonville PI 32220	
			Change
			🗆 Add
			🖾 Remove
			🗆 Change
			🗆 Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record 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 record is filed.

Dated 12/1/2021		
dr		
Signature of a r	nember or authorized representativ	e of a member
V	\neg $-\tau$	
JESUS	PIMIENTA	PORRAS
	Typed or printed name of signee	



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2921 DEC 1 23 5 3

FLORIDA DEPARTMENT OF STATE Division of Corporations

November 10, 2021

JOSE MOLINA PO BOX 442314 JACKSONVILLE, FL 32222

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SUBJECT: NORTH EAST TRANSPORTATION LLC Ref. Number: L20000117262

We have received your document for NORTH EAST TRANSPORTATION 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 registered agent must sign accepting the designation.

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.

Anissa Butler Regulatory Specialist II

Letter Number: 221A00027311

www.sunbiz.org