## LZO 000134450

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	-

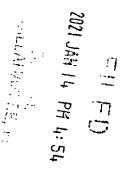
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## **COVER LETTER**

ξTO:

Registration Section Division of Corporations

Tallahassee, FL 32314

RaceTransp	port LLC		
SOBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jonathan Clavijo-Montoya		
		Name of Person	
	Race Transport LLC		
		Firm/Company	
	2955 West 80 Street Apt 2	03	
		Address	· · · · · ·
	Hialeah FL 33018		
		City/State and Zip Code	
	racetransportdispatch@gma		- <u></u>
		to be used for future annual report no	tification)
For further information c	concerning this matter, please concerning	all;	
Jonathan Clavijo-Monto	ya	305 336-1529 at ()	
Name (	of Person	Area Code Daytii	me Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	
Registration : Division of C		Registration Section of Co	
P.O. Box 632		The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Race Transport LLC		
( <u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our records.) orda Limited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability for idea document number L20000134450	y Company were filed on May 18, 2020	and assigned
his amendment is submitted to amend the following	;;	
. If amending name, enter the new name of the l	imited liability company here:	
	•	202
he new name must be distinguishable and contain the words "	Limited Liability Company," the designation "LLC" or the a	abbreviation "L.L.C."
inter new principal offices address, if applicable:		
<u>Principal office address MUST BE A STREET AD</u>	DRESS)	- M
	<u></u>	
		. <u>5</u> 1
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registe gent and/or the new registered office address her		me of the new regist
Name of New Registered Agent:		
New Registered Office Address:	English and the second of the	
	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 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>	<u>Address</u>	Type of Action
AMBR	Jonathan Clavijo-Montoya	2955 West 80 StreetApt 203	□ Add
		Hialeah Fl, 33018	<b>-</b>
			□Remove
			□ Change
	<del></del>		🗆 Add
			□Remove
			□Change
			□Remove
			LiAdd
		<del></del>	□Remove
			☐ Change
			□Add
			Remove
			Change

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ffective date, if	other than the date of filing isted, the date must be specific and	;	(ор	tional)
an effective date is in ote: If the date in	isted, the date must be specific and iserted in this block does not m	cannot be prior to date of fi seet the applicable statut	iling or more than 90 days aft ory filing requirements, tl	er filing.) Pursuant to 605,0207 ( his date will not be listed as t
ocument's effecti	e date on the Department of St	tate's records.	, , , , , , , , , , , , , , , , , , , ,	
record specifies a Lis filed.	delayed effective date, but not a	an effective time, at 12:	01 a.m. on the earlier of:	(b) The 90th day after the
1 1				
ated 1/12/20	Z.(			
•	JA Co	1		
	Signature of a m	nember or authorized repre	sentative of a member	
		athan Clavijo Typed or printed name of		
	١,	11 // /	1	