LZO 000145388

Office Use Only



700390782367

07.18/22--01006--018 **25.00



A. BUTLER OCT 1 0 2022

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

16

	Or -		(, , , , , , , , , , , , , , , , , , ,		
		•	FILED		
	LUTONE TRANSPORT LLC		000a		
(Name of the Lim	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)	2022 JUL 18 PM 2:		
	, , , , , , , , , , , , , , , , , , ,				
The Articles of Giganization for this Limited I	Liability Company were filed on	5-28-2020	Tand assigned F.S.T.		
Florida document number L20000145388			, , , , , , , , , , , , , , , , , , ,		
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited liability company her	<u>·e</u> :			
The new name must be distinguishable and contain the	words "Limited Liability Company," the de	signation "LLC" or th	ne abbreviation "L.L.C."		
Enter new principal offices address, if appli	cable:				
(Principal office address MUST BE A STRE	ET ADDRESS)				
Enter new mailing address, if applicable:					
		 			
(Mailing address MAY BE A POST OFFICE	<u> </u>				
			<u> </u>		
B. If amending the registered agent and/or	ranistarad office address on our re-	annde antauthe	uma af tha sau maintanad		
agent and/or the new registered office addre	registered office address on our re- ess here:	corus, <u>enter the r</u>	iame of the new registered		
Name of New Registered Agent:	LUIS NARVAEZ				
New Registered Office Address:	2914 SERA BELLA WAY				
	Enter Florida street address				
	KISSIMMEE	, Florida	34744		
	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
MGR	LIVETTE TEJEDA	2914 SERA BELLA WAY	
		KISSIMMEE, FL 34744	= p
			□ Change
			□Remove
			□Change
			□Add
		· .	□Remove
			□Change
			□Add
			□Remove
			☐ Change
			🗖 Add
			Remove
			Change
			□Add
	•		Remove
			Change

	any other information,				
					
- -					
 _	<u> </u>				
	· · · · · · · · · · · · · · · · · · ·				
				···	
			· · · · · · · · · · · · · · · · · · ·		
_	 				
					
			,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
Note: If the d	e, if other than the date ate is listed, the date must be splate inserted in this block defective date on the Departi	oes not meet the applica	to date of tiling or more that able statutory filing requ	(optional) n 90 days after filing.) Pursuant irements, this date will not b	to 605.0207 (3)(to 605.0207 (3
f the record specif ecord is filed.	fies a delayed effective date	, but not an effective tin	ne, at 12:01 a.m. on the	earlier of: (b) The 90th day	y after the
Dated	JULY 8	2022	_ ,		
	1	V			
 .	Signa	the of a member or author	rized representative of a m	ember	_
	<i>V</i>	LUIS NA	RVAEZ		

Typed or printed name of signee