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(Red	questor's Name)	
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AUG 23 2020 S. YOUNG

COVER LETTER

Division of Cor		•	
SUBJECT: DaiSk	ye Transport,LLC		
SUBJECT:		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:	
	Melvin Dale		
		Name of Person	
	DaiSkye T	ransport,LLC	
		Firm/Company	
	351 sw 30	th terrace	
		Address	
	fort laude	erdale,fl 33312	
	dalamalyii	City/State and Zip Code n15@yahoo.com	
		to be used for future annual report not	ification)
For further information of	oncerning this matter, please c	all:	
Melvin Dale		at (<u>954</u>) 826-46	520
Name of Person		Area Code Daytim	ne 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)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration : Division of C		Registration Se Division of Co	
P.O. Box 632		The Centre of	•
Tallahassee,	FL 32314	2415 N. Monro Tallahassee, FL	e Street, Suite 810 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

S

DaiSkye Transport,	LLC				ĨĨ
(Name of the Limited	Liability Compa Florida Limited L	ny as it now appears on o Liability Company)	ur records.)		
The Articles of Organization for this Limited Liab Florida document number	. , .	were filed on06/2	29/2020	and assigned	
This amendment is submitted to amend the follow	ving:			(a)	
A. If amending name, enter the new name of t	he limited liabi	lity company here:			
The new name must be distinguishable and contain the wor	ds "Limited Liabil	ity Company " the designat	ion "LLC" or the	abhreviation "L.L.C."	
Enter new principal offices address, if applical		351 sw 30t			
(Principal office address MUST BE A STREET	ADDRESS)	fort laudero	lale,fl 333	312	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>			-	<u> </u>
B. If amending the registered agent and/or regagent and/or the new registered office address		ddress on our record	s, <u>enter the na</u>	ame of the new regi	stered
Name of New Registered Agent	Melvin D)ale			
New Registered Office Address:	351 sw	30th terrace			
	fort laude	Enter Florida sira erdale	eei address Florida _	33312	
		Спу	FIOTIUA _	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>	Name	Address	Type of Action
_MGR	Melvin Dale	351 sw 30th terrace	: Add
		fort lauderdale,fl 33312	□ Remove
			□Change
			□Add
			□Remove
			□Change
			Remove
			□ Change
			□Add
			□Remove
			□Change
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ective date, if other than a effective date is listed, the date te: If the date inserted in the nument's effective date on the	e must be specific a iis block does not	nd cannot be prior to meet the applicab	date of filing or more	doptiona than 90 days after filin equirements, this dat	g.) Pursuant to 605,020	17 (3)(b) is the
cord specifies a delayed eff s filed.	ective date, but no	ot an effective time	e, at 12:01 a.m. on t	he earlier of: (b)	The 90th day after the	e
		. 7020	. •			
ed July 09						
ed July 09 Mel	in Da	le				

Filing Fee: \$25.00