LZO 000210552

(Re	equestor's Name)	
(Ac	ddress)	
- (Δ,	ddress)	
(***	30,033)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(8)	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
	·	 1
Special Instructions to	Filing Officer:	

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OCT 02 2020

COVER LETTER

DIVISION OF C	orporations		
SUBJECT:	IDNI TRAN	SPORT LLC.	· •
	Name of Limi	ted Liability Company	-
The enclosed Articles of	of Amendment and fee(s) are sub-	nitted for filing.	
Please return all corres	pondence concerning this matter t	to the following:	
	- Jamely	Bravo Alvare Name of Person	LT.
	EDMI T	RANSPORT LLC	<u></u>
	1681 NU	N 45 Street	
	- Oakland	Park, H	. 33309
	1-mail address: Vid	2104820 gmail.	fication)
For further information	concerning this matter, please ca	H:	
Yandy B	ravo Dvarez of Person	at (786) & O	5-1779. Telephone Number
Enclosed is a check for	the following amount:		
S25.00 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 Address:

TO:

Registration Section

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

FDMI Transp	ict IIC.	223 M. 3-17 Pil 7: 19
(Name of the Limited Liability Compan (A Florida Limited Lia	y as it now appears on cability Company)	ur records.)
The Articles of Organization for this Limited Liability Company vi Florida document number <u>L20000 21055 2</u> .	were filed on $\frac{1}{2}$	0 / 7070 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ldress on our record	s, enter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	vet address
	City	Florida
New Registered Agent's Signature, if changing Registered Agent:	City	zą Code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p		

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 2020 AUG 17 Pil 7: 19	Type of Action
Title Mar.	Milka Linnes	1681 NW45 street	□Add
		Catland Pt. P. 3339	ivRemove
			□Change
THE Mar.	Yourdy Bravo Alvan	ez 1681 NW 45 street	Add
		ez 1681 NW 45 Street Oakland Part, Cl. 333	509 _ □Remove
			□Change
			□Add
			□Remove
			□ Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			🗆 Change
			□Add
			□Remove
			□Change

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	not be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 the applicable statutory filing requirements, this date will not be listed a 's records.
cord specifies a delayed effective date, but not an e s filed.	effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ed 8/10	<u> 2020.</u> In
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