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COVER LETTER

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SUBJECT:	- JABE	DBA	FAST	TRANSIT	7 LL	_C	٥	
		Nan	ne of Limited	Liability Company				
The enclosed Art	ticles of Amend	ment and fee(s)) are submitte	ed for filing.				
Please return all	correspondence	concerning this	s matter to th	e following:				
		LORO	UA FE	Name of Person	<u>क्</u> र	- .		
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For further inform	nation concerni	ng this matter,	piease caii:					PH PH
اما	rena f	ELDMA	~	at (786 Area Code	, <u>286</u>	- 56	599.	
	Name of Person			Area Code	Dayt	ime Telepho	ne Number	
Enclosed is a che	eck for the follo	wing amount:						
\$25.00 Filing		30.00 Filing Fe Certificate of S		□ \$55.00 Filing Certified Cop (additional copy	у		\$60.00 Filing Certificate of Certified Co (additional cop	of Status &
<u>Mailing</u>	Address:			Stre	et Address:			
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Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	AND I LEC
(<u>Name of the Limited Liability Compan</u> (A Florida Limited L	ny as it now appears on our records.) (ability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L 2000 218009</u>	were filed onand assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3800 SOUTH OCERN DR.
(Principal office address MUST BE A STREET ADDRESS)	Suite 217. Hollywood, FL. 33019.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3800 SOUTH ODERN DR. SUITE 217. HOLLY WOOD
	FL. 33019,
B. If amending the registered agent and/or registered office adapted agent and/or the new registered office address here:	AUG 2
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	
	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>	Address	Type of Action
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an effective d	late is listed, the date	must be spec	ific and cannot b	pe prior to date of fili applicable statutor	ng or more than 90	(optional) days after filing.)	Pursuant to 605	5.0207
	ffective date on the				ry ming requirem	ems, mis date	will hot be list	ed as
record speci l is filed.	ties a delayed eff	ective date, b	out not an effe	ctive time, at 12:0	l a.m. on the earl	ier of: (b) The	2 90th day afte	r the
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		Signatur	e of a member	or authorized represe	entative of a member	er .		