K20000274751

(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:
B1 +0 (13

Office Use Only



400391328384

97/22/22--91013--019 ****2**5.00

2022 JUL 22 PH 4: 21

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:	EFREN	TRANSPORT LLC		
Subject.	Name of Lir	nited Liability Company		
The male sail total and	`			
The enclosed Afficies of	Amendment and fee(s) are suf	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	EFREN	HERNANDEZ GONZALEZ		
	-	Name of Person		
	EFR	EN TRANSPORT LLC		
	<u> </u>	Firm/Company		
	,	1332 NW HTH ST		
		Address		
	веі	LLE GLADE, FL 33430		
	-	City/State and Zip Code		
	efren	gonzalez0731@gmail.com		
	E-mail address: (to be used for future annual report no	tification)	
For further information e	oncerning this matter, please c	all:		
EFREN HERNANDEZ	GONZALEZ	786 337-3361		
Name of Person		Area Code Dayiii	ne Telephone Number	
Enclosed is a check for th	ne 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 Registration S	Section	<u>Street Address:</u> Registration Se		
Division of Corporations		Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1 1 3 1 1 1

FILED

EFREN TRANS.	PORT LL	2022 JUL 22 PM 4: 29
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears I Liability Company)	on our records.).
The Articles of Organization for this Limited Liability Compan for this document number		
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited lia	bility company her	<u>e</u> :
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the des	ignation "L.L.C" or the abbreviation "L.L.C."
ter new principal offices address, if applicable: 11403 5TH AVE PUNTA GORDA, FL 33		PUNTA GORDA, FL 33955
Principal office address MUST BE A STREET ADDRESS)		
		
nter new mailing address, if applicable:	11403 5TH AVE	PUNTA GORĐA, FL 33955
Aailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our rec	ords, <u>enter the name of the new regist</u> o
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Floride	i 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.

II 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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
	 -		□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Remove
			□Change
			□Add
			□Remove
			□Change

<u>Note:</u>	tive date, if other than the date of filing:
he reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	JULY 18 , 2022
	Signature of a member of authorized representative of a member EFREN HERNANNIZ GONZALEZ