LZ0 000 285 232

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
	10/19

Office Use Only



500353703165

13/19/38--81014--838 **25.88

PILED

100 OCI 19 A DO OCI

Lineno.
11/2/20

COVER LETTER

TO:

TO: Registration Se Division of Cor			
	Fransportation LLC		
SUBJECT: *	Name of Lim	ited Liability Company	
The analoged Articles of	Amendment and fee(s) are sub	mitted for filing	
	ondence concerning this matter	-	
	Reynold Bazile		
		Name of Person	
	L20000285232		
		Firm/Company	<u> </u>
	2957 Mango Ln	• •	
	2937 Wango En	Address	<u> </u>
	West palm Beach FL. 3340		
		City/State and Zip Code	
	morpheoustransportation @	gmail.com to be used for future annual report no	tification)
For further information e	oncerning this matter, please c		ancaron,
Nancy Bazile		786 414-9620	
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	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 Address		Street Address:	action
Registration S Division of C		Registration S Division of Co	
P.O. Box 632	.7	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of New Registered Agent: New Registered Office Address:	2957 Mango Ln Enter Fl West Palm Beach	lorida street address, Florida 33403 Zip Code	
		lorida street address	
	2957 Mango Ln		
Name of New Registered Agent:			
	Nancy Bazile		
ent and/or the new registered office addr	cas nei g.		
		records, enter the name of the n	ew regis
		GALE O	
			_ن
new name must be distinguishable and contain the words "Limited Liability Company," the designation rew principal offices address, if applicable: Incipal office address MUST BE A STREET ADDRESS)	<u> </u>	╊┈╄╌╂┄╌╌╴	
		<u> </u>	;
nter new mailing address, if applicable:			
			T
		7073	
rincipal office address MUST BE A STRE	ET ADDRESS)	h	49
		· · · · · · · · · · · · · · · · · · ·	
_			
e new name must be distinguishable and contain the	words "Limited Liability Company," the	e designation "LLC" or the abbreviation "	L.L.C."
If amending name, enter the new name	or the limited hability company	<u>nere</u> :	
	-	hawa	
is amendment is submitted to amend the fo	llowing:		
orida document number L20000285232			
e Articles of Organization for this Limited	Liability Company were filed on $\underline{0}$	09/11/2020 and a	ssigned
	ited Liability Company as it now appe (A Florida Limited Liability Company	7	

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>	<u>Address</u>	Type of Action
MGR	Reynold Bazile	2957 Mango Ln West Palm Beach, GL. 33403	
			□ Remove
			□Change
	 -		🗆 Add
			□Remove
			□Change
			□ Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
			🗀 Add
			□ Remove
			□Change
		***	□ Add
			□Remove
			□ Change
			□Add
			🗆 Remove
			□ Change

		· · · · · · · · · · · · · · · · · · ·		
			<u> </u>	
····	<u>.</u>			
		<u> </u>	•	
		<u> </u>		
_				
		·		
				
				
				
	···-			
	•			
ffective date, if other than the an effective date is listed, the date mus lote: If the date inserted in this blocument's effective date on the De	ock does not meet the applicat	date of filing or more than 90 ole statutory filing requiren	(optional) days after filing.) Pursuant to 605.0 ments, this date will not be listed	0207 (d as t
record specifies a delayed effectiv d is filed.	e date, but not an effective tim	ie, at 12:01 a.m. on the ear	lier of: (b) The 90th day after	the
,	2020			
October 14 Pated	• =			
Pated October 14	Signature of a member or author	ized representative of a memb	er	

Filing Fee: \$25.00