L2000 303760

(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:





400361977434

03/15/21--01029--010 **30.00



50

COVER LETTER

	ion Section of Corporations	
RHI	NOPARTS TRUCKS TRAILERS L	LC .
SUBJECT:	Name of Lin	nited Liability Company
The enclosed Artic	les of Amendment and fee(s) are su	omitted for filing.
Please return all co	rrespondence concerning this matter	to the following:
	JOSE L GONZALEZ	
		Name of Person
	RHINOPARTS TRUCKS	TRAILERS LLC
		Firm/Company
	4310 FOX RIDGE DR	
	· 	Address
	WESTON FL 33331	
		City/State and Zip Code
	office@logisticsimports.co	
For further inform	tion concerning this matter, please of	(to be used for future annual report notification)
JOSE L GONZAL		at () Area Code Daytime Telephone Number
,	ame of Person	Area Code Daytime Telephone Number
Enclosed is a check	for the following amount:	
□ \$25.00 Filing I	Fee \$30.00 Fiting Fee & Certificate of Status	Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Division P.O. Box	tion Section of Corporations	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

RHINOPARTS TRUCKS TRAILERS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Aminton of Organization Const. (11) is a Little West	Company were filed on 09/25/2020 and assigned
Florida document number L20000303760	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	mited liability company here:
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADI	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
agent and/or the new registered office address here	red office address on our records, <u>enter the name of the new registered</u> :
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida
-	, Florida
New Registered Agent's Signature, if changing Register	red Agent:
provisions of all statutes relative to the proper and accept the obligations of my position as registered	;, . <u></u>
	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	Type of Action
AP	SANCHEZ. JUAN C	308 SW 120TH AVE PEMBROKE PINES, FL 33025	—
			_ ≡ Remove
			_ □Change
AP	RODRIGUEZ, VERONICA C	308 SW 120TH AVE PEMBROKE PINES, FL 33025	5 _ ≣ Add
			_ □Remove
			_ □Change
			_ □Add
			_ □Remove
			_ □Change
			_ 🗆 Add
			_ 🗆 Remove
			_ 🗆 Change
		·	<i>例</i> _倕dd _
			Dikemove 5
			[OChange_
			بب _£Add
			_ 🗆 Remove
			_ □Change

		- <u> </u>		
		_ 		
	-			
		··· <u>-</u>		
	·			
				
	 			
				
				
				
		-		
				
ective date, if other than the n effective date is listed, the date mu-	date of filing:	r to date of tiling or more than	(optional)	Survigant to 605 00
te: If the date inscrted in this bl	lock does not meet the applic	able statutory filing requi	rements, this date w	ill not be listed
cument's effective date on the D	epartment of State's records	•	. •	21
			÷ 2	[2]
ecord specifies a delayed effective is filed.	e date, but not an effective t	ime, at 12:01 a,m, on the	earlier of: (b) The	00th after th
			,	15
ted 3RD MARCH	2021			. بارسان
			\sqrt{z}	·
	/ Trino	2,1	X · 劃:	щ <u>С</u>
	S. Jacobs of a service and	orized r presentative of a me	unbar	
	Signature of a member or auth	Willed the sentant Got at the	intoci	•