L20 000 321405

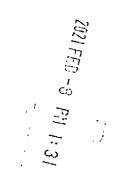
(Requestor's Name)
()
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400359271734

02/08/21--01012--022 **25.00



D alasta

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	e/va TRansf Name of Lim	Portation 22C ited Liability Company	·
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	/	Vixon Del	ya
	DelVa	Name of Person TRans Pox ta Lin Firm/Company	2110
	III OCEAN	PKU/V Adoress	
	<u>Boynton</u>	Beach, F1 33 City/State and Zip Code	435
	nickende E-mail address: (City/State and Zip Code Lo be used for faure annual report notifi	ication)
For further information co	ncerning this matter, please c		
Name of	m Della Person	at (<u>407)</u> 625 Area Code Daytime	Telephone Number
Enclosed is a check for the	e 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	<u>:</u>	Street Address:	tion

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	<u></u>
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
with the second	

The Articles of Organization for this Limited Liability Company v	vere filed on		_ and assigned
Florida document number			
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 designation "I	LLC" or the abbre	eviation "L.IC."
Enter new principal offices address, if applicable:		<u>.</u>	
(Principal office address MUST BE A STREET ADDRESS) *			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office at agent and/or the new registered office address here:	ldress on our records, <u>en</u>	ter the name	of the new registered
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:	Enter Florida street aa	ldress	202
	Enter Florida street aa City	, Florida	
	Ciţ		Zip Cbde Co
New Registered Agent's Signature, if changing Registered Agent:		2	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pheing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties rovided for in Chapter 6	s, and Lam fa 05, F.S. Or, ij	mutar wan and T hi s document is
If Chan	ging Registered Agent, Signate	ure of New Regi	stered 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
AP	Delva Nixon	111 Ocean Phwy	[Add
		111 Ocean Phwy boynton Beach, F23343	Remove □
			🗆 Change
<u>.</u>			□Add
			□Remove
			□Change
			□Add
			□Remove
			🗆 Change
			🗆 Add
			□Remove
			Change
			🗆 Add
			□Remove
			□Change
		<u></u>	🗀 Add
			Remove

				.	
			···		
					
				. *1-1	
				-	
					
	-				
					
	<u> </u>		·	- 	
					
Promise data it at	than than the dute of filit	247		(ontional)	
an effective date is lis	ther than the date of filin sted, the date must be specific an	id cannot be prior to d	ate of filing or more than	190 days after filing.) Purs	iant to 605,020
	serted in this block does not e date on the Department of		statutory tuing requ	rements, this date will r	iot be fisted a.
	·				
record specifies a d	delayed effective date, but no	ot an effective time,	at 12:01 a.m. on the	earlier of: (b) The 90tl	i day after the
is filed.	,				-
2 /	i - i	200/			
ated <u> </u>	Februard Nixon	. 402/			
	11:1	N.O.C.	2		
	$h / V / \Omega L$	- 1. XV V V C	ŧ.		
	10 EXON	<u> </u>	ed representative of a m	k	

Filing Fee: \$25.00