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COVER LETTER

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cun ir ci		and On Transport LLC	·			
SUBJECT	l:	Name of Lim	ited Liability Company			
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please reti	ım all correspo	ndence concerning this matter	to the following:			
		Roxroy F Williams				
			Name of Person			
			Fi. (C			
			Firm/Company	4.	20:	
		1421 SW 98th Ave			20 DE	77
			Address		2020 DEC 2	Section (
		Pembrooke Pines, fl 33025			— -P	
		handa ataunan art Quaha a aa	City/State and Zip Code	::0 ::0 ::1 ::1	P# -:	O
		handontransport@yahoo.co E-mail address: (to be used for future annual report notifi	cation)	: 12	
For furthe	r information c	oncerning this matter, please c	all:			
Roxroy W	/illiams		321 4422885 at ()			
-	Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed	is a check for th	ne following amount:				
■ \$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Co (additional cor	of Statu ppy	
_	Mailing Addres Registration S		Street Address: Registration Sec	tion		
Division of Corporations			Division of Corp	orations		
	P.O. Box 632 Fallahassee, I		The Centre of Ta 2415 N. Monroe	allanassee : Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

William's Hand On Transport LLC			
(Name of the Limited Liabilit (A Florida	ty Company as it now appears on or Limited Liability Company)	ur records.)	
The Articles of Organization for this Limited Liability C	Company were filed on $\frac{11/02/20}{}$		_ and assigned
lorida document number L2000347291	_ '		
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limi	ited liability company here:		
Villiam's Hands On Transport LLC			
he new name must be distinguishable and contain the words "Lim	ited Liability Company," the designate	ion "LLC" or the abbre	viation "L.L.C."
Inter new principal offices address, if applicable:			· · · · · · · · · · · · · · · · · · ·
<u>Principal office address MUST BE A STREET ADDR</u>	RESS)		
	<u> </u>		F 1 2020 DEC
		- 132 d	
inter new mailing address, if applicable:		1	
		55 P.	-
Mailing address MAY BE A POST OFFICE BOX)		11121	
			
		(2. <u>6.</u>	5
 If amending the registered agent and/or registered gent and/or the new registered office address here: 	d office address on our record	s, <u>enter the name c</u>	of the new regis
The analysis are the second se			
Name of New Registered Agent:			
New Registered Office Address:		***	
	Enter Florida str	eet address	
		, Florida	<u> </u>
	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
AMBR	Roxroy Williams	1421 SW 98th Ave	□Add
		Pembrooke Pines, fl 33025	□Remove
			■ Change
MGR	Simone Daley	547 Brighton Court	≣ Add
		Kissimmee, fl 34758	\ Remove
			□Change
			Remove 2020 DD Ghange
			C 2 D Add Remove
			Change
			□ Add
			□Remove
			Change
			□Remove
			Change

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	. 12/17	\cap	2020			
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