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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THE ELITE CARRIER SERVICES OF MIAMI LLC

Account Number : I20120000040

: (305)405-2600

Phone Fax Number

: (305)405-2601

Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please.

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION PINERA TRANSPORT LLC

Certificate of Status	0
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Estimated Charge	\$52.50

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Corporate Filing Menu

Help

1 Jun. 25. 2021 2:57FM THE ELITE CARRIER SERVETTER

TO: Registration Solution of Co.					
	RANSPORT LLC				
SUBJECT:	Name of Limi	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
	ondence concerning this matter				
	JANETTE ORTEGA			2021 JUN 25 PM 12: 37 SECRETARY OF STATE TALL AHASSEE, FLORID	
		Name of Person		三	_
	THE ELITE CARRIER SE	RVICES OF MIAMI	,	SSEE O	i I
		Firm/Company	<u> </u>	F S 7	Ç
	12060 NW SOUTH RIVE	R DR		FAIE	
		Address		_	
	MEDLEY/FL 33178				
	· · ·	City/State and Zip Code			
	JORTEGA@ELITECSOM.				
•	·	to be used for future annual report notif	ication)		
For further information	concerning this matter, please ca				
JANETTE ORTEGA		305 405-2600 at ()			
Name	of Person	Arca Code Daytimo	Telephone Number		
Enclosed is a check for t	the following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
Mailing Addre Registration		Street Address: Registration Sec	etion		

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

TO ARTICLES OF ORGANIZATION OF

PINERA TRANSPORT LLC				
(Name of the Lim	ited Liability Company as it now app. (A Florida Limited Liability Company	ars on our records.)		
The Articles of Organization for this Limited I Florida document number L20000381749		2/07/2020 and assigned		
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability company	here:		
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if appli	eable:			
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	· · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and/or agent and/or the new registered office addre		records, enter the name of the new register		
Name of New Registered Agent:	JOSE LUIS BOZA PINERA			
New Registered Office Address	6919 W 36TH AVE APT 201			
-1017 200 201101 00 201101	Enter Florida street address			
	HIALEAN GARDENS	, Florida ³³⁰¹⁸		
	Ciŋi	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 Changing Registered Agent, Signature of New Registered Agent

If an Jun. 25. 2021 is 2:58 PM, n(s) THE ELITE CARRIER SERV the title, name, and address of No. 3913 son F. 6g added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	JOSE LUIS BOZA PINERA	6919 W 36TH AVE APT 201	□Add
		HIALEAH GARDENS FL 33018	□Reinove
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e record	d specifies a del led.	ayed effectiv	e date, but no	ot an effectiv	e time, at 12	:01 a.m. on th	e earlier of: (b) The 90th day	after the
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