

621000007020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

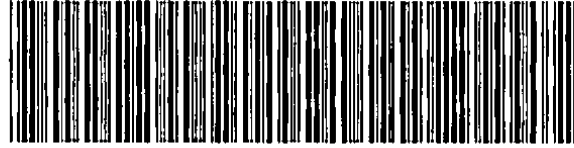
(Business Entity Name)

(Document Number)

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JAN 28 2021

3/13/21

COVER LETTER

Registration Section
Division of Corporations

888 TRANSPORTATION I, LLC

SUBJECT: _____
Name of Limited Liability Company

Enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHN L. SOILEAU

Name of Person

WATSON, SOILEAU, DELEO & BURGETT, P.A

Firm/Company

3490 NORTH U.S. HIGHWAY 1

Address

COCOA, FL 3292

City/State and Zip Code

jsoileau@brevardlawgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John L. Soileau _____ at (_____) _____
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$5.00 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)
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Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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**

888 TRANSPORTATION 1, LLC

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

Articles of Organization for this Limited Liability Company were filed on 12/29/2020 and assigned
the document number L21000007020.

An amendment is submitted to amend the following:

amending name, enter the new name of the limited liability company here:

_____ new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

new principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS)

new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX)

amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
City Zip Code

Registered Agent's Signature, if changing Registered Agent:

I 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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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

2021 JAN 28
4:09:24
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ending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
moved from our records:

t = Manager

IR = Authorized Member

<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
SUMMIT SHAH	402 High Point Drive	☒ Add
	Cocoa, FL 32926	☐ Remove
		☐ Change
MONICA SHAH	402 High Point Drive	☒ Add
	Cocoa, FL 32926	☐ Remove
		☐ Change
		☐ Add
		☐ Remove
		☐ Change
		☐ Add
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		☐ Remove
		☐ Change

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g. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the instrument's effective date on the Department of State's records.

January 2021



Summit Shah, Member

Filing Fee: \$25.00