

L21000024982

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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APR 08 2021  
S. YOUNG

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Obed f. NISSAN Transportation LLC  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Obed Vilbert

Name of Person

Obed f. NISSAN Transportation LLC

Firm/Company

14839 Greater Pine BLVD

Address

CLERMONT FL. 34711

City/State and Zip Code

Obed.Vilbert@gmail.com

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

For further information concerning this matter, please call:

Obed Vilbert

Name of Person

at ( 954 ) 4170 7713

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

**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**

Obed & Nissan Transportation LLC

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

The Articles of Organization for this Limited Liability Company were filed on Jan 11 - 2012 and assigned  
Florida document number L 210000124982

This amendment is submitted to amend the following:

**A. If amending name, enter the new name 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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

14839 Greater Pines BLVD  
Clermont FL 34711

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

14839 Greater Pines BLVD  
Clermont FL 34711

**B. If 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:

Obed Valbert

New Registered Office Address:

14839 Greater Pines BLVD

Enter Florida street address

Clermont, Florida FL 34711  
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 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Obed Vilbert	14839 Greater Pines BLVD, CLERMONT	FL 34711 <input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	NISSANNA Vilbert	14839 Greater Pines BLVD, CLERMONT	FL 34711 <input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Obed Vilbert	14839 Greater Pines BLVD CLERMONT	FL 34711 <input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	NISSANNA Vilbert	14839 Greater Pines BLVD CLERMONT	FL 34711 <input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Obed Vilbert	14839 Greater Pines BLVD CLERMONT	FL 34711 <input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Obed NISSANNA Vilbert	14839 Greater Pines BLVD CLERMONT	FL 34711 <input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 11-01-21 2-10-21

*[Signature]*

Signature of a member or authorized representative of a member

Obed Gilbert

Typed or printed name of signee

**Filing Fee: \$25.00**