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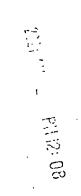


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COVER LETTER

Registration Section

TO:

Division	of Corp	porations			
	GRO'S T	RANSPORT AND CHROME	POLISH, LLC		
SUBJECT:	_	Name of Limi	ited Liability Company		
The enclosed Arti	icles of a	Amendment and fee(s) are sub-	mitted for filing.		
Please return all e	orrespo	ndence concerning this matter	to the following:		
		NELSON GEIGEL RIVER	RA		
	Name of Person				
	NEGRO'S TRANSPORT AND CHROME POLISH LLC				
			Firm Company	<u></u>	
		2240 \$ CONWAY RD ST	E 319		
		· · · · · · · · · · · · · · · · · · ·	Address		
		ORLANDO, FL 32812			
			City/State and Zip Code		
		F-mail address: 1	to be used for future annual report notifi	cation)	
Eze thethor inform	ontion o	oncerning this matter, please ea		·····,	
		•			
NELSON GEIGEL RIVERA		407 785-0144 at ()	Telephone Number		
	Name of	[Person	Area Code Daytime	Telephone Number	
Enclosed is a chec	ck for th	e following amount:			
■ \$25.00 Filing	! Fee	☐ \$30.00 Filing Fee & Certificate of Status	LI \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (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

NEGRO'S TRANSPORT AND CHROME POLISH LLC

(Name of the Limited (A	Liability Company as it now appears on our records,) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number 121000028493	bility Company were filed on 01/12 2021	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicat	ple:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Bo	<u> </u>	
		269
B. If amending the registered agent and/or reg	gistered office address on our records, <u>enter the na</u>	
agent and/or the new registered office address	here:	73
		•
Name of New Registered Agent:		
New Registered Office Address:		. 25
	Enter Florida street address	30
	, Florida	Ziv 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.

It 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>	Address	Type of Action
AMBR	NELSON GEIGEL RIVERA	2440 S CONWAY RD STE 319	
		ORLANDO, FL 32812	□Remove
			= Change
MGR	HECTOR S LEVIS	5085 KELLCHRIS LN	= Add
		SAINT CLOUD, FL 34771	□Remove
			□Change
			⊒Add
			□Remove
			\(\tau \) Change
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		01/12/2631			
Effective date, if other the (If an effective date is listed, the d. Note: If the date inserted in document's effective date on	this block does not i	meet the applicable s	e of tiling or more than statutory filing requi	(optional) 190 days after filing.) Purs rements, this date will i	mant to 605,0207 (not be listed as t
ne record specifies a delayed e ord is filed.	ffective date, but no	t an effective time, a	it 12:01 a.m. on the	earlier of: (b) The 900	h day after the
Dated		2021			
Meson	Rejord &				
	Signature of a	member or authorized	representative of a m	ember	
NELSON GEIGE	L RIVERA				
		Typed or printed nar	ne of signee		

Filing Fee: \$25.00