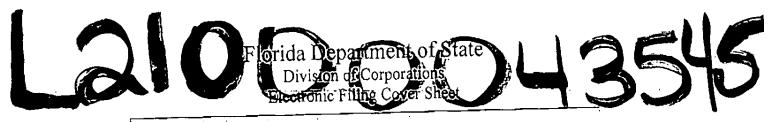
Division of Corporations

Page 1 of 2



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000338288 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: THE ELITE CARRIER SERVICES OF MIAMITULO

Account Number : I20120000040

Phone

: (305)405-2600

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. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 4 A AUTO TRANSPORT "L.LC."

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

j:

COVER LETTER

TO: Registration Sec Division of Corp			
	RANSPORT "L.LC		. 22
SUBJECT:	Name of Limi	ted Liability Company	2021 SEP 13 PH 1: 46
			7
The enclosed Articles of A	mendment and fee(s) are subt	mitted for filing.	ν. - Α
Please return all-correspon	dence concerning this matter.	to the following:	
	JENNY MEDINA		
1.		Name of Person	· ·
	THE ELITE CARRIER SE	RVICES OF MIAMI LLC	
ti.		Pinu/Company	
	12060 NW SOUTH RIVE	RDR	_
TE		Address	
βI	MEDLEY, FL 33178		
		City/State and Zip Code	
ï	YMEDINA@ELITECSOM E-mail address: (o be used for future annual report notific	ation)
For further information co	ncerning this matter, please ca	di:	
JENNY MEDINA		305 405-2600	
Name of	Person	Arca Code Daytime	Felephone Number
) :			
Enclosed is a check for th	e following amount:		
≡ \$25.00 Piling 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)
•			(apprinter copy is citeron-)
];.			
Mailing Address Registration S Division of C	ection	Street Address: Registration Sect Division of Corp	orations
P.O. Box 632 Tallahassee, F	7	The Centre of Ta 2415 N. Monroe Tallahassee, FL 3	llahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

4 A AUTO TRANSPORT "L.LC	_		
(Name of the Limite	ed Liability Compa (A Florida Limited L	ny as it now appears on our liability Company)	reçords.)
The Articles of Organization for this Limited Li	ability Company	were filed on OFF 572021	#WO assigned
Florida document number L21000043545	<u>·</u> ,		•
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
The new name must be distinguishable and contain the w	rords "Limited Liabi	lity Company." the designation	on "LLC" or the abbreviation "L.L.C."
		6041 ARBUCKLE CRI	EEK RD
Enter new principal offices address, if applic		SEBRING FL 33870	
(Principal office address MUST BE A STREE	T ADDRESS)	SEBRING 1 D 350.V	
T'			
F!		6041 ARBUCKLE CR	eek RD
Enter new malling address, if applicable:	nav	SEBRING FL 33870	
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/or agent and/or the new registered office address.	ss here:	VAREZ RODRIGUEZ	, (1110) (1110)
Name of New Registered Agent:			
. New Registered Office Address:	6041 ARBUC	KLE CREEK RD Enter Flortda stre	at address
r.		Emer Plorida Suc	
版 ·	SEBRING	City	, Flortda 33870
	Dealstaned Agent	•	
New Registered Agent's Signature, if changing	Registered Agent	i in this conse	in. I further garee to comply with the
I hereby accept the appointment as registered by accept the appointment as registered provisions of all statutes relative to the propaction as registered provision as registered principles of the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this	istered agent as registered offic	provided for in Chapte e address, I hereby com	er 605, F.S. Or, if this document is
W.	II Ch	anging Registered Agent, Si	August on Lieu rediments when

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
MGR	ZAEL RODRIGUEZ	19831 NW 65TH CT	□Add
. \$		HIALEAH FL 33015	■Remove
 11 20			☐ Change
» Å			DAdd
1			□ Remove
} 7			□Change
:			□Add
(f)			□Remove
V d			Change
.1			CJAdd
.:			Remove
P			Change
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. •			□Change

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		2021 SEP
		- <u>-</u>
		PHILL
		<u> </u>
n effec nte: If	date, if other than the date of filing: (optional) we 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 60 he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list's effective date on the Department of State's records.	15.0207 (3 ted as th
ecord is file	pecifics a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day aft	er the
ited_	PTEMBER 13TH 2021	