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## **COVER LETTER**

TO: Registration Section

Tallahassee, FL 32314

LLC	
Name of Limited Liability Company	
at and fee(s) are submitted for filing.	
cerning this matter to the following:	
vn Brown	
Name of Person	
Transportation LLC	
Firm/Company Power Way	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	2
his matter, please call:	ÚZI
813 815-2795	7021 PTY
Area Code Daytime Telephone Number	<del></del>
g amount:	≥ J
U Filing Fee & S55,00 Filing Fee & S60,00 Filing Fee & Certificate of Status Certified Copy Certificate Copy is enclosed)	of Status &
Street Address:	
•	
	Name of Person  Name of Person  Transportation LLC  Firm/Company  Pongo Way  Address  y Chapel FLORIDA 33545  City/State and Zip Code  n1989@icloud.com  E-mail address: (to be used for future annual report notification)  this matter, please call:  813  815-2795  at (

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Reuben Transportion LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and assigned 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address . Florida

## 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 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>	Type of Action
Ambr	Rashawn Brown	30408 Pongo Way, Wesley Chapel fl, 33545	
			⊡Add
			□Remove
			<b>3</b>
MGR	Natalie Brown		Change
			□ Add
			□Remove
		30408 Pongo Way, Wesley Chapel fl, 33545	
			Change
			□ Add
			_
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			□Add
			□ Remove
			Inchibit
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) January 27,2021 E. Effective date, if other than the date of filing: \_\_\_\_\_\_\_(optional)= (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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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. May 10 2021 Dated \_\_\_\_ Signature of a member or authorized representative of a member Rashawn Brown Typed or printed name of signee