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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
Fax Number : (850)617-6183

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Phone : (407)777-7470
Fax Number : (321)206-9743

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MC RESIGN
LETAN TRANSPORTATION LLC

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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October 12, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LETAN TRANSPORTATION LLC
11037 WHISTLING PINE WAY
ORLANDO, FL 32832

SUBJECT: LETAN TRANSPORTATION LLC
REF: L21000056315

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

This is a LLC but the amendment that was faxed in is for a corporation. Juliana Velasquez Arteaga must sign the last page of the amendment.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux
Regulatory Specialist II

FAX Aud. #: H22000347704
Letter Number: 222A00022866

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COVER LETTERTO: Registration Section
Division of Corporations

SUBJECT: LETAN 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:

ALEJANDRO ALARCON PEREZ

Name of Person

Firm Company

11037 WHISTLING PINE WAY

Address

ORLANDO, FL 32832

City/State and Zip Code

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

For further information concerning this matter, please call:

JULIANA VELASQUEZ ARTEAGA

407

757-6464

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 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)Mailing Address:Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314Street Address:Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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**ARTICLES OF AMENDMENT
 TO
 ARTICLES OF ORGANIZATION
 OF**

LETAN 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 02/04/2021 and assigned
 Florida document number L21000056315

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:

JULIANA VELASQUEZ ARTEAGA

New Registered Office Address:

11037 WHISTLING PINE WAY

Enter Florida street address

ORLANDO

City

Florida

32832

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.

JVA

If Changing Registered Agent, Signature of New Registered Agent

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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	ALEJANDRO ALARCON PEREZ	11037 WHISTLING PINE WAY	<input type="checkbox"/> Add
		ORLANDO, FL 32832	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	AURA L. ALDANA CARRILLO	10623 BILLINGS ST	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32832	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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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.

Print

JVA

Signature of a member or authorized representative of a member

JULIANA VELASQUEZ ARTEAGA

Typed or printed name of signee

Filing Fee: \$25.00

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