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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

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

Email	Address:	 · - <u> </u>	7	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NORTHGATE TRANSPORT LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NORTHGATE TRANSPORT LLC (Name of the Limited Liability Compan (A Florida Limited Li	ny as it now appears on our records.) Jability Company)
The Articles of Organization for this Limited Liability Company we Florida document number L21000064020	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ility company here:
NorthGate Services LLC	
The new name must be distinguishable and contain the words "Limited Liabilit	ity Company," the designation "LLC" or the abbreviation "L.L.C."
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 adagent and/or the new registered office address here:	nddress on our records, <u>enter the name of the new registe</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address Florida City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete p	ee to act in this capacity. I further agree to comply with a 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

Title	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□ Change
		45/451-11-11-11-11-11-11-11-11-11-11-11-11-1	□Add
			□Remove
			□Change
			□Remove
			□Change
<u></u>			□ Add
			Remove
			□Change
		1181 - 1 1191 - 1	□Add
			□Remove
		Lar-Little	□Change
			□Add
			□Remove
			□Change

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Note:	tive date, if other than the date of filing:
	rd 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 iled.
ord is f	02/22 2022 .
ord is f	02/22
ord is f	02/22 . 2022 . Signature of a member or authorized representative of a member

Filing Fee: \$25.00