L21000120571



(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(C:	ty/State/Zip/Phone #)	
(Ci	ty/State/Zip/Priorie #)	,
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)	
(· · · · · · · · · · · · · · · · · · ·	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Consist Instructions to	Filler Officer	
Special Instructions to	Filing Onicer:	

Office Use Only



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STUILLEHASSEE, FL

COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

CHICAR	NSPORT LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing,	
Please return all correspon	ndence concerning this matter	to the following:	
	HARRISON MERCADO		
	·	Name of Person	
	H & A TRANSPORT LLC	•	
		Firm/Company	
	3744 VIA RIZZOLI CT		
		Address	
	KISSIMMEE, FL 34759		
		City/State and Zip Code	
	HMERCADO171@YAHO		
	E-mail address: (to be used for future annual report noti	fication)
For further information co	oncerning this matter, please c	all:	
HARRISON MERCADO)	561 903-6611	
Name of	Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	e following amount:		
■ \$25.00 Filing Fee	S30.00 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 S	ection	Street Address: Registration Sec	
Division of Co P.O. Box 632		Division of Cor The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H & A TRANSPORT LLC

company has been notified in writing of this change.

(Name of the Limited Liability Compan (A Florida Limited Lia	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number $\frac{1.21000120571}{1.21000120571}$.	vere filed on <u>04/27/2023</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the abbrev	riation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	ري - - مادا	202
		<u> </u>
	a gr	
Enter new mailing address, if applicable:	AS	-
(Mailing address MAY BE A POST OFFICE BOX)	míż	
	77	5
	C	9
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ldress on our records, <u>enter the name of</u>	the new regist
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street address	
	Florida	
	City	Lip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p		

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

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			□ Change
			□ Add
			□Remove
			
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove

MY TITLE AS MGR TO MGRM	4 FOR BANK PURPOSES
	
 -	
	
	
If an effective date is listed, the date must be s	te of filing:
e record specifies a delayed effective dat rd is filed.	te, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	. 2024
11	. 1
	nature of a member or authorized representative of a member

Filing Fee: \$25.00