L21000122226

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phor	ne #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Na	me)
(De	ocument Number)
Certified Copies	Certificate	es of Status
Special Instructions to	Filing Officer:	
		6/22/21 TM

Office Use Only



600364366936

05/17/21--01016--008 **25.00

21 HAY IT PH 3: 44

COVER LETTER

	egistration Sec ivision of Corp			
SUBJECT	Bibi Transp	ortation Services LLC	·	~
NODJECI	•	Name of Lin	nited Liability Company	
The enclos	sed Articles of a	Amendment and fee(s) are sub	omitted for filing.	
Please retu	rn all correspoi	ndence concerning this matter	to the following:	
		Luis Medina		
Name of Person				
		Bibi Transportation Service	es LLC	
Firm/Company				
		1422 Nw 19th St		
		·	Address	
		Cape Coral, FL 33993		
			City/State and Zip Code	
		Medinaluis879@yahoo.con	to be used for future annual report not	Of malination
For further	information ec	oncerning this matter, please c	·	неацоп)
Luis Medi		mater, please c	239 571-1541	
Name of Person		at ()	te Telephone Number	
	Name of	reison	Area Code Daytin	e Telephone (Sumber
Enclosed is	s a check for the	e 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)
R D P.	ailing Address egistration S ivision of Co O. Box 6327 allahassee, F	ection orporations 7	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SAN COLUMN TANA

Bibi Transportation

21 MAY 17 PM 3: 44

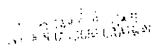
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Florida document number L21000122226 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability of the new name must be distinguishable and contain the words "Limited Liability Contents 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)	mpany," the designation	"LLC" or the abbreviation "L.L.C."
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability of the new name must be distinguishable and contain the words "Limited Liability Contents new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	mpany," the designation	
The new name must be distinguishable and contain the words "Limited Liability Contents of the new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	mpany," the designation	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:		
Enter new mailing address, if applicable:	<u> </u>	
··· —		
··· —		
··· —		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered office addre	ee an aur raaavde, a	retar the name of the new register.
agent and/or the new registered office address here:	ss on our records, en	mer the name of the new register
Name of New Registered Agent:	<u>.</u>	<u></u>
New Registered Office Address:		
	Enter Florida street address	
		, Florida
C	ity	Zip Code

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>	Address 2	1 MAY 17 PM 3: 44	Type of Action
MGR	Serguey Padron Onetto	2200 NE 7th Ave		= Add
		Cape Coral, Fl 33909)	□Remove
				□Change
				□Add
				LIRemove
				□Change
***				🗀 Add
		-		□Remove
				
				□Remove
				Change
				UAdd
				□Remove
				\Change
				□ Add
				□Remove
				Change