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2021 DEC 27 AM 7: 54 SECHERARI SE STATE



COVER LETTER

TO: Registration Section Division of Corporations		·
SUBJECT: T.B.S Transport LLC Name of Limited Liability Company	<u>2021 YOY 2</u> 3	A4 9:49
The enclosed Articles of Amendment and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Jason Speaight Name of Person		
T.B.S Transport LLC		
_ 19115 Climbing Aster	DR	
Tampa, FL 33647 City/State and Zip Code T. B. Stransport LLC 29 mail. E-mail address: (to be used for luture annual report notification)		
T.B. Stransport LLC @ gmail. E-mail address. (to be used for future annual report not lication	Com	
For further information concerning this matter, please call:		
Jason Speaight at (863) Ido-40 Name of Person Daytime Tel	ephone Number	
Enclosed is a check for the following amount:		
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)	Z \$60.00 Filin Certificate of Certified Co (additional cop	of Status &

Maria Maria

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION ED

2021 DEC 27 AM 7: 54

TBS TransTort (Name of the Limited Liability Compa (A Florida Limited I	LL SECRETA	AV OF STATE
The Articles of Organization for this Limited Liability Company Florida document number <u>L2100013350</u> 5	were filed on) 22 2031 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab \mathcal{N}/\mathcal{A}		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		10
(Principal office address MUST BE A STREET ADDRESS)		H
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/	A
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our recor	ds, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida s	treet address
	City	Florida 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.

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
MGR	Kebrinawhite	19115 Climbing Ast	1 FROAdd
			□ Remove
			Z C hange
MGR	Jason Speaight	19115 climbing Aster	D€□Add
	v	Tampa, FL ,3364	7 ′□Remove
			Change
AMBR	Kebrina White		□Add
			Remove
			Change
			🗆 Add
			□Remove
			□Change
· 			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change

famen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	Jason Speaight is an owner
	of this business T. B. STransport LLC.
	Kebring White is also Owner of thus said
	business T.B. Stransport LLC. Percentage
	85 follow, 30/50. Both are Dwner/Mngcks
	of business and have been authorized for
_	Changes to any Legal document under Sombizeorg. Also our new address is 19115 Climbing
	Aster Drive Tampa FL ,33647
_	
_	
_	
	· · · · · · · · · · · · · · · · · · ·
_	
ffectiv	e date, if other than the date of filing:
	tive 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	it's effective date on the Department of State's records.
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
is file	
	14
ated _	March 21 . 2021/
	The film fully
	Signature of a member or authorized representative of a member
	1 habring with to
	Typed or printed name of signee

Filing Fee: \$25.00