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(Re	questor's Name)		
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(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
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## **COVER LETTER**

TO: Registration S Division of C			-
SUBJECT: BILL	· Orift Tra	Name of Limited Liab	Dility Company
Dear Sir or Madam:			
The enclosed Statemer	nt of Correction and fee(s) a	are submitted for filin	g.
Please return all corres	spondence concerning this r	natter to the following	g:
KC M YOY	Name of Person		-
BlueDrif	+ Transpor	7 LLC	_
4050 For	ecost DR		-
Brandon	Funcia 33 City/State and Zip Code	3511	-
Support C	W BWCDY F to be used for future annual	Franco (Including Property of Control of Con	A. Cum
For further information	n concerning this matter, plo	ease call:	
KC M-Uam	e of Person	at ( 407 Area Code	Daytime Telephone Number
P.O. Box 6	n Section Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check fo	or the following amount:		
្សា <b>ន</b> 25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

## STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209. F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: Bluedin Ft Transport LLC.

SECOND: The Florida Document number of the limited liability company is: L210DD 144849

THIRD: Document to be corrected is LLC. Clucture of the Articles Of Organization (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

When I was filling my LLC: I mad made a mistage of the CLO Of Mistage Cleur of the CLO Of Mistage Cleur of the CLO Of Mistage Cleur of the CLO Of Mistage Or Company I aligned the Low of the CLO Of Mistage Or Company I aligned the Document was defectively signed and the appropriate correction are as follows:

Signature of new registered agent, if applicable :( NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

New Registered Agent's Signature, if changing Registered Agent:

The electronic transmission of the record was defective.

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.

Registered Agent's Signature

Filing Fee: Certified Copy: \$25.00

\$30.00 (optional)

<u>OR</u>