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(Re	questor's Name)	
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

Registration Section

TO:

Div	ision of Cor	porations		
	TRANSPO	RTSY LLC		
SUBJECT:		Name of Lim	ited Liability Company	···
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Jose Salcedo		
			Name of Person	
		TRANSPORTSY LLC		
			Firm/Company	* dv 200*
		1364 NW 78th Ave		
			Address	
		Doral, FL 33126		
			City/State and Zip Code	- "
		finance@transportsy.com E-mail address: (to be used for future annual report no	tification)
For further in	nformation c	oncerning this matter, please c	all:	
Jose Salcedo)		786 319-7401	
	Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	Filing Fec	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)
	iling Addres		Street Address:	action
	gistration S vision of C	Section forporations	Registration S Division of Co	
P.C). Box 632	7	The Centre of	Tallahassee
Tal	lahassee, l	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TRANSPORTSY LLC		ં 20 ક
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	ALCE
The Articles of Organization for this Limited Liability Company Florida document number L21000198986	were filed on 04/29/2021	A Passigned S S E R
This amendment is submitted to amend the following:		74.43 7:44
A. If amending name, enter the new name of the limited liab	ility company here:	(1)
The new name must be distinguishable and contain the words "Limited Liabse Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	lity Company," the designation "LLC" or 1364 NW 78th Ave Doral, FL 3	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1364 NW 78 DOMAL FL	AUE 33126
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<u>. </u>
	. Floric	la
	City	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>	<u>Address</u>	Type of Action
AMBR	RAUL GUTIERREZ BAQUERO	6070 W 18TH AVE, APT 306	□Add
		HIALEAH, FL 33012	■Remove
			☐ Change
AMBR Yariva Rivero	1364 NW 78th Ave	= Add	
		Doral, FL 33126	🗆 Remove
			Change
			□Add
			□ Remove
			□ Change
			□Add
			□ Remove
			□Add
			Remove
			□Change
			□Remove
			□ Change

	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Note: If	date, if other than the date of filing:	5.0207 ted as
record s d is filed	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
Dated	, 2021	
	- Shee falud	
	Cinn = 1	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00