2/1/23, 4:49 PM

Division of Corporations

Florida Department of State Division of Compositions Electronic Filings (ever Sho

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : AB ALL SERVICES INC

Account Number : I20200000155 Phone : (305)882-1238 Fax Number : (305)882-1260

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please..

Email Address:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN YLS BROKERAGE LLC

Certificate of Stams	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu Help

FEB - 2 2023

K. Brumbley

COVER LETTER

TO: Registration S Division of Co		5 4	
	KERAGE LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and foc(s) are sub	unitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	YOEL LOPEZ		
		Name of Person	
	YLS BROKERAGE LLC		
		Firm/Company	
	7741 NW 7TH ST APT 30)6	
		Address	
	MIAMI FL 33126		
	AB1100@YAHOO.COM	City/State and Zip Code	
	E-mail address; (to be used for fiture annual report notification)	
For further information of	concerning this matter, picase c	all:	
YOEL LOPEZ		305 3058821238	
Name o	of Person	Area Code Daytime Telephone Number	
Enclosed is a check for t	he following amount:		
□ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)	
Mailing Address Registration S Division of C	Section	Street Address: Registration Section Division of Corporations	
P.O. Box 632	17	The Centre of Tallahassee	
Tallahassee,	rl 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YLS BROKERAGE LLC		
(Name of the Limited Liabili (A Fiorid:	ty Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 5/4/2021	and assigned
Florida document number L21000208368	 '	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited llability company here:	
YL\$ FREIGHT LLC		
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	;	. 123
(Principal office address MUST BE A STREET ADDR	(ESS)	- B = = = =
		- 522
		- P
Enter new mailing address, if applicable:		<u>-: '%</u>
(Mailing address MAY BE A POST OFFICE BOX)		. S
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter the ne</u>	ime of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street address	
	, Florida	
	Chy	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 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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			Change
			□Add
			🗀 Remove
			□Change
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			Remove
			Change
			□ Add
			□ Remove
			DChange
			□Add
			Remove
			F/Change

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