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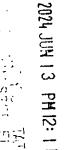
(Re	equestor's Name)	
(Ac	idress)	
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-		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	_
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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08/13/24--01029--005 **30.00



COVER LETTER

Tallahassee, FL 32314

	Registration Se Division of Cor			
eun irc		O TRANSPORTATION LLC		
SUBJEC	1:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		YULIER MACHADO		
			Name of Person	
		MACHADO TRANSPOR	TATION LLC	
			Firm/Company	
		1328 WELLINGTON ST		
			Address	
		WEST PALM BEACH FL	. 33401	
			City/State and Zip Code	
		MACHADOTRNSPORTA	TION@GMAIL.COM to be used for future annual report no	
For furthe	er information co	oncerning this matter, please co	·	omeanon)
YULIER	MACHADO		239 207-0754	
	Name of	Person	Area Code Dayti	me Telephone Number
Enclosed	is a check for the	e following amount:		
\$25.0	0 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)
	Mailing Address Registration S		Street Address: Registration S	ection
	Division of Co		Division of Co	
	P.O. Box 6327		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MACHADO TRNSPORTATION	ELLC	
(Name of the Lim	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
he Articles of Organization for this Limited lorida document number		DRIDA and assigned
his amendment is submitted to amend the fol		
. If amending name, enter the new name	of the limited liability company her	<u>e</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company," the des	signation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	20:
	·-·	2024 JUN 13
		22
nter new mailing address, if applicable:	 	′O ` —
<u> Mailing address MAY BE A POST OFFICE</u>	<u> </u>	
s. If amending the registered agent and/or gent and/or the new registered office addre		cords, enter the name of the new regist
Name of New Registered Agent:	YULIER MACHADO	
New Registered Office Address:	1328 WELLINGTON ST	
	Enter Florid	la street address
	WEST PALM BEACH	, Florida
	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
MGR	CHANELY D MARINO	1328 WELLINGTON ST	□ Add
		WEST PALM BEACH FL 33401	≣Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
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fecti	ve date, if other than t	the date of filing:(optional) must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0
n effe ster	ective date is listed, the date i If the date inserted in this	must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 s block does not meet the applicable statutory filing requirements, this date will not be listed
		Department of State's records.
		ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
is file	ed.	
		2004
ited]	JUNE 6	. 2024
	X XXX	
		Signature of a member or authorized representative of a member
	YUHER MACHAD	
	1 OBJEK MACHAD	O .

Filing Fee: \$25.00