LZ1000251336

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COVER LETTER

то:	Registration Se Division of Cor			
SUBJE	CT: EXECUI	TIVE TRANSPORT, LLO	C	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
			-	
		Prod	cessing Department	
			Name of Person	
			Submitted for filing. Itter to the following: COCESSING Department Name of Person Firm/Company 1450 Vassar St Address Reno, NV 89502 City/State and Zip Code Indocs@incauthority.com Sis: (to be used for future annual report notification) See call: at (800	
		1	l450 Vassar St	
			Address	
				
		Name of Limited Liability Company Name of Limited Liability Company		
		E-mail address: (to be used for future annual report notif	ication)
For fur	ther information c	oncerning this matter, please co	all:	
	Process	ing Department	a. (800 \ 638-2320	
		f Person		Telephone Number
Enclos	ed is a check for th	ne following amount:		
	5.00 Filing Fee	☐ \$30.00 Filing Fee &	Certified Copy	Certificate of Status & Certified Copy
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	Registration Sectio Division of Corpor Clifton Building	n ations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EXECUTIVE TR	RANSPORT, LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L21000251336	were filed on 05/28/21	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE		
	,	·2. O
B. If amending the registered agent and	i our records, <u>enter th</u> e	name of the ne
registered agent and/or the new registered o		
		<u>-</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Emer Florida street address	
	, 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>	<u>Address</u>	Type of Action
MGR	Chandler Gull	10380 Nw 10Th St	© Add
		Plantation, FL 33322	Remove
			☐ Change
			Add
			Remove
			Change
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neffective date is listed te: If the date insert	the date must be speci- led in this block does	fic and cannot be prior to drauot meet the applicable	nte of filing or more than 90 statutory filing requirem	days after filing.) Pursus	ant to 605.02 of he listed:
rument's effective da	ate on the Departmen	nt of State's records.			,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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Filing Fee: \$25.00