11/3/23, 11:01 AM

Division of Corporations

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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 DB & NJ TRANSPORT LLC

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KOV - 6 2023

COVER LETTER

TO: Registration Sec Division of Corp	ction porations		
	RANSPORTLLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	DAMIAN BRENA-SERA		
		Name of Person	·····
	DB & NJ TRANSPORT I	LC	
		Firm/Company	
	13221 SW 67TH ST		
		Address	
	MIIAMI, FL 33183		
		City/State and Zip Code	
	AB1100@YAHOO.COM	to be used for future annual report notif	(cation)
For further information co	oncerning this matter, please c		realion)
DAMIAN BRENA-SERA	A	305 882-1238	
Name of	Person		e Telephone Number
Enclosed is a check for the	e following amount:		
□ S25.00 Filing Fec	□ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed)	☐ \$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DB & NJ TRANSPORT LLC			
(Name of the Lim	ited Liability Company as it n (A Florida Limited Liability C	ow appears on our records.) ompany)	
The Articles of Organization for this Limited I	Liability Company were fil	ed on <u>96-08-2021</u>	and assigned
Florida document number L21000266069	· · · · · · · · · · · · · · · · · · ·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability con	<u>ıpany here</u> :	
DB & NJ TRANSPORT LLC			
The new name must be distinguishable and contain the	words "Limited Liability Compa	my," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
	*****		r-1
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
			<u></u>
			:
B. If amending the registered agent and/or		on our records, enter the nar	me of the new registere
agent and/or the new registered office addre	ss here:		•
Name of New Registered Agent:	****		
New Registered Office Address:	13221 SW 67TH ST		
		Enter Florida street address	
	MIAMI, FL	, Florida ^{3.}	3183
	Ciņ.		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>	Name	Address	Type of Action
AMBR	DAMIAN BRENA-SERA	13221 SW 67TH ST	□Add
		MIAMI, FL 33183	□Remove
			■Change
			DAdd
			□Remove
			Change
			□Add
			□Remove
			Change
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Note: If t	the date inserte		oes not meet th	ie applicable st			al) ing.) Pursuant to 605. ate will not be liste	
f the record specord is filed.		ed effective date	, but not an eff	fective time, at	12:01 a.m. on the	carlier of: (b)	The 90th day after	the
Dated	-02	, ()	202	13				
		mala	797 	 .				

Filing Fee: \$25.00

Typed or printed name of signee