L21000266924

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400368852634

86/29/21--01034--015 **25.00

2021 JUN 29 AMII: U

: - , 2021 - Kinse

COVER LETTER

TO: Registration Division of C	Section orporations	,	
JN & Far	nily Transportation LLC		-
-	Name of L	imited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are so	ubmitted for filing.	
	ondence concerning this matte		
	Daniel Lebrun		
		Name of Person	
		Firm/Company	
	1716 NE 158th St		
	N. dag	Address	
	North Miami Beach, FL,	·	
	landylandy12337@yahoo.e	City/State and Zip Code	
		(to be used for future annual report noti	fication)
For further information of	concerning this matter, please of	eall:	
Nerlande Joachin		786 619-5880	
Name o	f Person		e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	Street Address: Registration Sec Division of Corp The Centre of Te 2415 N. Monroe Tallahassee, FL	porations allahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JN & Family Transportation LLC		
(Name of the Li	nited Liability Company as It now app (A Florida Limited Liability Company	ears on our records.) y)
The Articles of Organization for this Limited	, <u>.</u>	06/08/2021 and assigned
Florida document number L21000266924	·	
This amendment is submitted to amend the fo	ollowing:	
A. If amending name, enter the new name	of the limited liability company	here:
The new name must be distinguishable and contain the	words "Limited Liability Company," the	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Enter new mailing address, if applicable:		UN 29
(Mailing address MAY BE A POST OFFICE	E BOX)	SSES TO
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office address on our	records, enter the name of the new registered
Name of New Registered Agent:	Nerlande Joachin	
New Registered Office Address:	1716 NE 158th ST	
	Enter Flo	orida street address
	North Miami Beach	, Florida ³³¹⁶²
	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 amending Authorized Person(s) authorized to munage, 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
MGR Nerlande Joachin	1716 NE 158th ST	∃ Add	
		North Miami Beach, FL 33162	□Remove
		□Change	
			□Add
		Remove	
			□Change
		□Add	
			□Remove
			Change
		□ Псипоче	
	•		Change
			□Add
		□Remove	
		`□ Change	
		□Add	
		□Remove	
			Channa

. II amt	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
•	
•	
•	
•	
•	
-	
-	
-	
-	
=	
-	
-	
_	
_	
	the date, if other than the date of filing:
ne record ord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	Jun 18, 2021
	- Pamos dons
	Signature of a member or authorized representative of a member
	Daniel Lebrun

Filing Fee: \$25.00