L21000298732

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





300418349683

11/06/23--01011--013 **25.00





ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our reconted Liability Company)	ords.)
The Articles of Organization for this Limited Liability Completion document number <u>L21000298732</u> .	pany were filed on 6/29/2021	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	
N/A		
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		202
Principal office address MUST BE A STREET ADDRES	<u> </u>	
		1 .
		77) 73;
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	···	<u>വ</u>
B. If amending the registered agent and/or registered of gent and/or the new registered office address here: Name of New Registered Agent:	fice address on our records, <u>ent</u>	er the name of the new reg
-	·	
New Registered Office Address:	Enter Florida street add	ress
	City	Florida Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Group Transportation Consultant Business LLC

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 obliquations 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.

COVER LETTER

Divisio	n of Corpo	rations			
	= =	ortation Consultant Busines	s LLC		
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed Ar	ticles of Ar	nendment and fee(s) are sub	mitted for filing.		
Please return all	correspond	ence concerning this matter	to the following:		
		Pablo Gonzalez			
		~ · · · · · · · · · · · · · · · · · · ·	Name of Person		
		Group Transportation Con	sultant Business LLC		
			Firm/Company		
		1721 SE 38th Ave			
			Address		
		Ocala, FL 34471			
			City/State and Zip Code		
		info@groupteb.com	to be used for future annual	report notification)	
For further infor	mation con	cerning this matter, please c		report nouncation,	
		certing this matter, prease c			
Pablo Genzalez			at ()	50550	
	Name of P	erson	Area Code	Daytime Telepho	ne Number
Enclosed is a che	eck for the	following amount:			
■ \$25.00 Filin	ig Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enc		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing	2 Address:		Street Ad	ldress:	

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

TO:

Registration Section

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

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

Title	Name	Address	Type of Action
MGR	Pablo Gonzalez	1721 SE 38th Ave	
		Ocala, FL 34471	□Remove
			☐ Change
			□Add
			□ Remove
			☐ Change
		·	□Add
			Remove
			Change
			□Add
			□Remove
			Change
			DAdd
			□Remove
			□Change
			□ Add
			□ Remove
			□Change

		
		
-		
		
-		
	<u> </u>	
ective (late, if other than the date of filing	;:(optional)
effectiv te: If th	e date is listed, the date must be specific and the date inserted in this block does not m	cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 neet the applicable statutory filing requirements, this date will not be listed as
	s effective date on the Department of St	
_	ecifies a delayed effective date, but not	an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
s filed.		
10/2	29	2023
ed	·	·
		/ lace ib
	1) (1) VIO	
	Signature of a n	nember or authorized representative of a member
	Signature of a n	nember or authorized representative of a member