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COVER LETTER

Registration Section Division of Corporations

TO:

	TRANSPORT, LLC			
SUBJECT:	Name of Lim	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	LUIS E. CAMEJO			
		Name of Person		
	CAMEJO TRANSPORT.	LLC		
		Firm/Company		
	13601 LARAWAY DR			
		Address		
	RIVERVIEW, FL 33579		SECRI TAL	2023 S
	camejoluis92@gmail.com	City/State and Zip Code	7 TE	2023 SEP 11
	E-mail address: (to be used for future annual report noti	fication)	
For further information of	concerning this matter, please c	all:		œ , ==
LUIS E. CAMEJO		813 598-6620 at ()	' '	05
Name (of Person		e Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Contact (additional corporation)	of Status &
Mailing Address Registration Division of C P.O. Box 632 Tallahassee.	Section Corporations 27	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FI	rporations Fallahassee e Street, Suite 810)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAMEJO TRANSPORT, LLC		
(<u>Name of the Limited Liability</u> (A Florida l	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on $\frac{07/16/2021}{\text{Lorida document number}}$.		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limite	ed liability company here:	
he new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the	he abbreviation "L.L.C."
nter new principal offices address, if applicable:	13601 LARAWAY DR	
Principal office address MUST BE A STREET ADDRE	ESS)	2023 ISEQ
	RIVERVIEW, FL 33579	FR SH TI
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	13601 LARAWAY DR	MARY OF S
	RIVERVIEW, FL 33579	8 05 FEE
		8 05 EE, FL
Name of New Registered Agent:		
New Registered Office Address: 13601 E	ARAWAY DR	
	Enter Florida street address	

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.

City

RIVERVIEW

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		
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			□Remove		
			□Change		
			□ Add		
		 	□Remove		
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ective date, if other than the date of filing affective date is listed, the date must be specific and	g:	date of filing or	more than 90 days	o ptional) after filing.) Pu	rsuant to	605.020
te: If the date inserted in this block does not neument's effective date on the Department of S	neet the applicab	ole statutory fili	ng requirements	s, this date wil	not be	listed a
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cord specifies a delayed effective date, but not s filed.	an effective tim	e, at 12:01 a.m	. on the earlier o	of: (b) The 90)th day a	ifter the
august 25	, 2023	_ •				
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