L21000348341

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT N	/AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Q. SILAS	
LEC - 1 2021	

Office Use Only



100376158601

11/00/21--01091--013 **30.00

2021 NOV -8 PH 2: 05 SECRETARY STANS

COVER LETTER

Registration Section Division of Corporations

TO:

OURITRAN	S LOGISTICS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of z	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	MARIA JOSEFA DA SIL	VA GAUDIO	
		Name of Person	
	ONIX INSTITUTE IMPR	OVEMENT BUSINESS LLC	•
		Firm/Company	
	14933 DRIFTWATER DR	:	
		Address	
	WINTER GARDEN FLOI	RIDA 34787	
		City/State and Zip Code	
	jo_contab@hotmail.com		
	E-mail address: (to be used for future annual report not	ification)
For further information co	oncerning this matter, please e	all:	
Maria Josefa da Silva Ga	udio	407 2884841	
Name of	Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for th	e 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of Co P.O. Box 632 Tallahassec, F	section orporations 7	Street Address: Registration Se Division of Co The Centre of	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

2021 NOV -8 PM 2: 05

OURITRANS LOGISTICS LLC

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>	Address	Type of Action
AMBR	RODRIGUES PRESSOTO, TANIA	6107 WATERSIDE ISLAND LN WINTER GARDE	N ≣Add
			□Remove
			□Change
			□Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove

-	
· · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·
*	
	
(If an effective date Note: If the date	, if other than the date of filing: (optional) e is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 tte inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed.
document's effe	ective date on the Department of State's records.
he record specific ord is filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
Dated	
v	
v	CRNAND RIGUES. Typed or printed name of signer

Filing Fee: \$25.00