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(Requestor	s Name)
(Address)	
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(City/State/2	Zip/Phone #)
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(Document	Number)
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: RICARM TRANSPORT
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:
reaso retain an correspondence concerning this matter to the following.
Pierre Richardson Lazarre Name of Person
RICARM TRANSPORT
Firm/Company
6216 62nd Way
West Palm Beach FL 33409 City/State and Zip Code Lazare Pierrerichard Son Dyamoo. Can E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Carmette Luzure at (954) 889-4386 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) 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

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(<u>Name of the Limited Liah</u> (A Flor	ollity Company as it now appears on our roida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability	Company were filed on	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation	*LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	ADECC:	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here	ed office address on our records, <u>er</u>	iter the name of the new registe
netter registered office address here	•	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ac	ldress
		, Florida
	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 Changing Registered Agent, Signature of New Registered Agent

 If amending or removed 	Authorized Person(s) authorized to ma from our records:	nage, <u>enter the</u>	title, name, and address of each	h person being added
MGR = Manager AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	21 SET 15 PH 3:01	Type of Action
MGR	Pierre Richardson Lazarre	(2) (6) (1) FL 3	nd way west palin bed	och EAdd
				□Remove
				□Change
MGR	Carmelle Lazarre	631663 FL 3	and way west Palm!	Boot Brad
				□Remove
				□ Change
				□Add
				□Remove
				Change
			.	□Add
		 -		□Remove
				□Change
				□Add
				□Remove
				□Change
				□Add
				□Remove
				□Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Effec	ive date, if other than the date of filing: (optional)
lf an ei Note:	ive date, if other than the date of filing:
docur	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
e reco	d 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
rd is f	led.
	Service de la constant de la constan
Dated	September 14 . 2021. Rive Richard Lynn Signature of a member or authorized representative of a member
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