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COVER LETTER

TO:

Registration Section **Division of Corporations**

Tallahassee, FL 32314

SUBJECT:	Mathicus Tean	15007+ L.C.	
The applaced Articles of	Amandment and foo(s) are sub-	mitted for filing	
	Amendment and fee(s) are sub-		
Please return all correspo	ondence concerning this matter	to the following:	
	Mucch	Name of Person	
	100	ACK-15 Firm/Company	
		SWeyo Avenu	L
	_	City/State and Zip Code	
		14 WASPORT 56 M	DUMWI, LAM
For further information o	oncerning this matter, please ca	all:	
Marc M	OHIVE Y	at (Sol) 75 8	3-945 ne Telephone Number
ivaine o	e r cison	Area Code Dayiii	ic receptione (various
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration S		<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co	
P.O. Box 632	.7	The Centre of T	Γallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mathieus Trans	po(+ 1.4.0	•	
(Name of the Limited Liability (Company as it now appears on (imited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Con Florida document number 21003696	mpany were filed on $8/$	17/21	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here:		
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designa	ation "LLC" or the abb	reviation "IL.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address here:	office address on our record	ds, enter the name	of the new registered
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:			;
	Enter Florida st	reet address	
		, Florida	
	City		Zip Code?
New Registered Agent's Signature, if changing Registered A			F.J.
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacted the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	iplete performance of my o nt as provided for in Chap	duties, and I am fa ter 605, F.S. Or, i	miliar with and f this document is

If Changing Registered Agent, Signature of New Registered Agent

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
MGR	Marc Mathieudr.	3815 OSWEED AVE BEACH FL- 33409	WEST PAU
			□Remove
		 	□Change
			🗆 Add
			□Remove
			□Change
	- 		□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Remove
			□Change

). If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an <u>Not</u>	ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(ac: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ument's effective date on the Department of State's records.
ecord i	cord 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 s filed.
Dat	ed August 23rd., 2021. Must Te Signature of a member or authorized representative of a member
	Mu fire Te
	Signature of a member or authorized representative of a member
	Marc Mathieu Je Typed or printed name of signee

Filing Fee: \$25.00