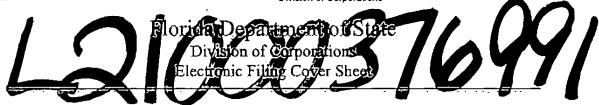
10/3/24, 11:27 AM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000334734 3)))



H240003347343ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

8633188218

Fax Number : (850)617-6383

From:

Account Name : DES-MATT, INC Account Number : I20180000078 : (352)223-3911 Phone Fax Number : (863)318-8218

nter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. •

_	ma	i	٦	A	44	,	^	e	ě	٠	
	ma	1	ı	. д	30	Г	e	5	5		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LEON & CESPEDES TRANSPORT LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

OCT 08 2024

CHE TYX

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LEON & CESPEDES T (Name of the Limited Liability Com) (A Florida Limite)	•	r records.)		- -	
The Articles of Organization for this Limited Liability Compar Florida document number 1.21000376991	ry were filed on08	/23/2021	an d	assigned	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lia	bility company bere:				
The new name must be distinguishable and contain the words "Limited Lisi	oility Company," the designation	on "LLC" or the	e abbreviation	"L.L.C."	
Enter new principal offices address, if applicable:	1723 TATTENHAM W	AY			
Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32837	_			
Enter new mailing address, if applicable:	1723 TATTENHAM W	'AY	2038 2038	7021.0	
Mailing address MAY BE A POST OFFICE BOX	ORLANDO, FL 32837			3 7	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records	enter the n	OF THE SY	new registe	
Name of New Registered Agent:	<u></u>				
New Registered Office Address: 1723 TATTE	1723 TATTENHAM WAY Enter Florida street address				
	ORLANDO	Florida	32837		
_	City		Zip Co		

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 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	MARINES LEON BATISTA	2455 WINCHESTER BLVD	□Add
· · · · · ·		KISSIMMEE, FL 34743	■Remove
			Change
AMGR	LEONARDO CESPEDES	1723 TATTENHAM WAY	□Add
	,	ORLANDO, FL 32837	□Remove
			■ Change
			DAdd
			Псеточе
			☐ Change
			_Add
			□Remove
			Change
			□Add
			Пкещоче
			□Add
			□Remove
			T Change

i amencii	mg any otner mtormanon	enter change(s) here: (Attach o	,,
lf an effecti Note: If	e date, if other than the dative date is listed, the date must be the date inserted in this block t's effective date on the Depart	specific and cannot be prior to date of fil does not meet the applicable statuto	(optional) ling or more than 90 days after filing.) Pursuant to 605.0207 ory filing requirements, this date will not be listed as
e record s rd is filed		te, but not an effective time, at 12:0) I a.m. on the earlier of: (b) The 90th day after the
Dated	OCTOBER 02	2024	
		Laonardo Caspad	les
	Sig	nature of a member or authorized repre-	sentative of a member
		LEONARDO CESPEE	nee.

Filing Fee: \$25.00