## 121000379396

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## **COVER LETTER**

TO: Registration So Division of Co			
SW RAIL	LLC		
SUBJECT:			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JULIO SNITCOVSKY		
	<u>.</u>	Name of Person	
	INTERTECH RAIL LLC		
		Firm/Company	<u> </u>
	1501 VENERA AVE SUF	ГЕ 320А	. 20
		Address	2022 CEC
	CORAL GABLES, FL 33	46	(A)
		City/State and Zip Code	
	julio@intertechrail.com		· :
		to be used for future annual report notification	n)
For further information of	concerning this matter, please c	all:	· · · · · · · · · · · · · · · · · · ·
JULIO SNITCOVSKY		305 3055620445 at ( )	
Name o	of Person		phone 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section		Street Address: Registration Section	
Division of Corporations		Division of Corporat	ions
P.O. Box 6327		The Centre of Tallah	
Tallahassee, FL 32314		2415 N. Monroe Stro	eet, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SW RAIL LLC		
( <u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number 1.21000379396	ompany were filed on 08/24/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company." the designation "LLC" of	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		26.
(Principal office address MUST BE A STREET ADDRE	ree)	2 C
ATTITUDA OFFICE AUGUESS MOST DE A STREET ADDRE		1 0
		<u> </u>
		<del>un</del> .
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		· — ·
		;; <u>'</u>
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter th	e name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	da
	City	daZip 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 Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	WILSON ANTUNES	1501 VENERA AVE SUITE 320A	
		CORAL GABLES, FL 33146	□Remove
			□Change
	<u>.                                    </u>		□Add 2022 □Remove
			Dicentove
			□Add
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			🗀 Remove
			□Change
			□Add
		<del></del>	□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional)
(If an 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)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Signature of a member or authorized representative of a member JULIO SNITCOVSKY Typed or printed name of signee

Filing Fee: \$25.00