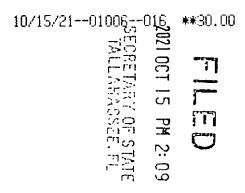
# 

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
<del></del>
Special Instructions to Filing Officer:

Office Use Only





#### **COVER LETTER**

Who may concern;

My LLC name GOALT FREIGHT LLC Document # L21000394476 files on 09/03/2021 owner name Ernelio Benitez Guerra with address 2810 62<sup>nd</sup> St W Lehigh Acres FL 33971 my phone number (786) 712-5570.

I want to change the name of my LLC and I pay for a Certificate of status with a new name BB TRANSPORT SOLUTIONS LLC and change the Articles of the LLC please

Thank you

2021 OCT 15 PM 2: 09
SECRETARY OF STATE

## **COVER LETTER**

TO: Registra Division						
	AT FREI	GHT LLC				
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed Arti	cles of A	mendment and fee(s) are sub	mitted for filing.			
Please return all c	orrespon	dence concerning this matter	to the following:			
		ERNELIO BENITEZ GU	ERRA			
			Name of Person	<del></del> ,		
		GOAT FREIGHT LLC				
			Firm/Company		2021 OCT	te-
		2810 62ND ST W			)C <u>T</u> -	-12
			Address	<u></u>	5	1
		LEHIGH ACRES , FL 339	<b>9</b> 71	00 1979 1979	PH	
		ERNELIOB@GMAIL.COM	City/State and Zip Code		2: 09	-
		<del>=-</del>	to be used for future annual report notif	ication)		
For further inforn	nation co	ncerning this matter, please co	all:			
ERNELIO BENI	TEZ GU	ERRA	786 712-5570			
	Name of	Person	Area Code Daytime	: Telephone Number	<del></del>	
Enclosed is a chec	ck for the	: following amount:				
□ \$25.00 Filing	Fee	S30.00 Filing Fee & Certificate of Status	(additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop (additional copy	f Status py	
<u>Mailing</u> Registr			Street Address: Registration Sec	ction		
Divisio	n of Co	orporations	Division of Con			
P.O. Bo Tallaha		L 32314	The Centre of T 2415 N. Monroe	e Street, Suite 810		

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GOAT FREIGHT LLC		
(Name of the Limited Ulabili (A Florida	ty Company as It now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on SEPT 03, 2021	and assigned
Florida document number L21000394476	<u>_</u> ·	
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
BB TRANSPORT SOLUTIONS LLC		
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" o	or the abbrevia to "L.L.C."
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·	APR S
Principal office address MUST BE A STREET ADDI	RESS)	
		- <del>200 - 10</del>
		m²n ⊐≤ —
Enter new mailing address, if applicable:		2: D
(Mailing address MAY BE A POST OFFICE BOX)		9
B. If amending the registered agent and/or registered	d office address on our records, <u>enter th</u>	e name of the new regi
gent and/or the new registered office address here:		
Name of New Registered Agent:		
Non Bosinson 1007 - Allinson		
New Registered Office Address:	Enter Florida street address	
	, Flori	ida
	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 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 =	<b>Authorized Member</b>

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
		<del></del>	☐ Change
			□Remove
		<del>-</del>	Change Change
			ST Change ACRE 71 ACRE
			CRETICALID PROMOTE 2: 05 Change
			☐ Change
			□Add
			□Remove
			Change
			□Remove
			☐ Change
		<del></del>	□Add
			□Remove
			□Chance

<del> </del>		<del></del>					
		·			<del></del>		
			<del></del>				
		<del></del>					
						<del></del>	
				<del></del>			
					ن	202	
<u> </u>						,	
					<u> </u>	000	
					33.7 35.7	2 ]	==
					OF S	PK	
					57.5	<u> </u>	)
			<del> </del>				
ective date, if other than the effective date is listed, the date mute: If the date inserted in this because of the late on the late.	e date of filing: ast be specific and ca block does not med	annot be prior to et the applicab	date of filing or	more than 90 days	<b>optional)</b> after filing.) P s, this date wi	ursuan: 10 605.0 Il not be listed	)20° d a:
cord specifies a delayed effecti s filed.	ve date, but not ar	i effective tim	e, at 12:01 a.m	. on the earlier (	of: (b) The 9	00th day after	the
ed OCT 06		2021					
	. 01 /	<i>!</i> 					
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			ve of a member			

Filing Fee: \$25.00