## L22000039066

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## **COVER LETTER**

TO:

	Registration Sc Division of Cor				
SUBJEC	G&N SUN	SHINE TRANSPORT LLC			
SUBJEC		Name of Lim	ited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		GREGORIO CONTRERA	S RODRIGUEZ		
			Name of Person		_
		G&N SUNSHINE TRANS	SPORT LLC		
			Firm/Company		_
6039 COLLINS AVE APT 901					
			Address		
		MIAMI BEACH , FL 3314	40		(~)
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	273 111 21
		gnsunshinetransport(	<del>-</del>		(mg. 2)
		E-mail address: (	to be used for future annua	report notification)	.2
For furth	er information c	oncerning this matter, please ca	all:		
GREGORIO CONTRERAS RODRIGUEZ 786		642-7445	- T.		
	Name o	f Person	Area Code	Daytime Telephone Numb	ल 📆 🗜
Enclosed	l is a check for th	ne following amount:			
<b>= \$2</b> 5)	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy radditional copy is er	Certific Certific	ate of Status &
	Mailing Address		Street A	······································	
	Registration S Division of C			ration Section of Corporations	
	P.O. Box 632			entre of Tallahassee	
	Tallahassee, I	FL 32314	2415 N	N. Monroe Street, Suite	810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G&N SUNSHINE TRANSPORT LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and assigned L22000039066 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 on our records, enter the name of the new registere agent and/or the new registered office address here: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address

## 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.

City

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	LAUREN PAEZ	6039 COLLINS AVE APT 901	<b>=</b> Add
		MIAMI BEACH, FL 33140	Петюче
			□Change
AMBR	Anthony Mera	6039 COLLINS AVE APT 901	≅Add
		MIAMI BEACH, FL 33140	⊡Венюус
			□Change
			☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
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ective date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be prior to date of filing or	r more than 90 days after filing.) Pursuant to 605.0
te: If the date inserted in this block does not meet the applicable statutory fil ument's effective date on the Department of State's records.	ling requirements, this date will not be listed
cord specifies a delayed effective date, but not an effective time, at 12:01 a.u s filed.	u, on the earlier of: (b) The 90th day after t
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ted 07/14/2023	