## 1220000 76323

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PALLAHASSEE ELOSIS

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S. PRATHER

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

FJW TRAN SUBJECT:	NSPORTATION LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Janio U Lay		
		Name of Person	
	FJW TRANSPORTATION	N LLC	
	·	Firm/Company	
	331 Montana Ave		
		Address	
	Saint Cloud, Florida 34769	)	
		City/State and Zip Code	
	Janio.Lay@gmail.com		
		to be used for future annual report n	otification)
For further information c	concerning this matter, please c	all:	
Janio U Lay		407 273-9343	
Name o	of Person		ime Telephone Number
Enclosed is a check for the	he 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		Street Address: Registration S	Section
Division of C		Division of C	
P.O. Box 632		The Centre of	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO

10
ARTICLES OF ORGANIZATION
OF

FJW TRANSPORTATION LLC		38. 38. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19
(Name of the Limited Liability Co. (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	TO A D
The Articles of Organization for this Limited Liability Comp.  Florida document number    L22000076323	any were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited 1	liability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>	
(Principal office address MUST BE A STREET ADDRESS	2	
		- <del></del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)  ganization for this Limited Liability Company were filed on 02/15/2022  and assigned number L22000076323  s submitted to amend the following:  ame, enter the new name of the limited liability company here:  e distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  pal offices address, if applicable:  didress MUST BE A STREET ADDRESS)  g address, if applicable:  MAY BE A POST OFFICE BOX)  the registered agent and/or registered office address on our records, enter the name of the new registered new registered office address here:  New Registered Agent:  instered Office Address:	
B. If amending the registered agent and/or registered office and/or the new registered office address here:	ice address on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Director	Janio U Lay	331 Montana Ave Saint Cloud, Fl 34769	
			□Remove
			□Change
			□ Add
			Remove
		<del></del>	□ Change
			□Add
			□Remove
		<u>-</u>	□ Add
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			□Add
			Remove
			□Change

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