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FILED 2022 APR 4 AM 8: 47 SECRETARY OF STATE

COVER LETTER

TO:

Registration Section Division of Corporations

ANEIROS TRANSPORT LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Edwin Armijo Name of Person Simplex Group Inc Firm/Company 7500 NW 52ND ST, SUITE 100 Address MIAMLEL 33166 City/State and Zip Code ANEIROS.YOANSI@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: YOANSI ANEIROS GONZALEZ Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee, ☐ \$55.00 Filing Fee & ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: **Mailing Address:** Registration Section Registration Section Division of Corporations **Division of Corporations** The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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ANEIROS TRANSPORT LLC

NSPORT LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on $\frac{02/16/2022}{2}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _ Florida __ CinvNew 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

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	Adrian Prado Gonzales	1982 BIRNHAM WOOD BEND	= Add
		KISSIMMEE, FL 34746	□Remove
			□Change
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If an effective da <u>Note:</u> If the d	e, if other than the date of ate is listed, the date must be spec- late inserted in this block doe ifective date on the Departme	cific and cannot be prior as not meet the applica	to date of filing or more able statutory filing re	(optional) than 90 days after filing.) Pursu equirements, this date will n	ant to 605,0207 (ot be listed as t
document s ci	receive date on the exeparation	in or orate a records.			
e record specion	fies a delayed effective date, l	but not an effective ti	me, at 12:01 a.m. on	the earlier of: (b) The 90th	day after the
	March 1st	2022	<u> </u>		
Dated					
Dated		CRAL	, _		
Dated	Signatu	re of a member of autho	orized representative of	a member	

Filing Fee: \$25.00