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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

fee waived
due to
clerical error.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A&M Transport Services LLC

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:

Melissa Arce

Name of Person

Firm/Company

9115 NW 113 ST

Address

Hialeah Gardens

City/State and Zip Code

FL, 33018

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Arce

786 543-5451

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CLERK OF STATE
TALLAHASSEE, FLORIDA

2022 MAR - 1 AM 12:33

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

A&M Transport Services 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 02/17/2022 and assigned
Florida document number 02/17/2022

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Diamond MA Transport Services LLC

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:

9115 NW 113 ST Hialeah Gardens FL, 33018

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

9115 NW 113 ST Hialeah Gardens FL, 33018

(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

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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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2023 MAR 1 APR 18 33
CLERK OF SUPERIOR COURT
JUDICIAL BRANCH 1
TALLAHASSEE, FLORIDA

FILED

2022 MAR - 1 AM 19:33
DEPT. OF STATE
WASHINGTON, FLORIDA

2022 MAR - 1 AM 12:33
OFFICE OF STATE
ATTORNEY, FLORIDA

750

(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)

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.

3/01/2022

Melissa Arce

Typed or printed name of signee

Filing Fee: \$25.00