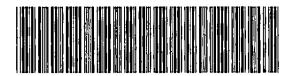
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
—— (Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only





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## **COVER LETTER**

то:	Registration Sec Division of Corp						
ALID IP	,	Brother's Transpo	oration Company, LLC				
SUBJE	UI:	Name of Lim	ited Liability Company				
The enc	losed Articles of a	Amendment and fee(s) are sub	mitted for filing.				
Please re	eturn all correspon	ndence concerning this matter	to the following:				
			Peterson Esperance				
			Name of Person				
		Brother's	Transportation Company, LLC				
			Firm/Company				
			3311 Paris pl				
			Address	<del></del>			
			Orlando, FL 32818	$\sim$			
			City/State and Zip Code	2 SE			
		•	ersonesperance@gmail.com				
		E-mail address: (	to be used for future annual report notif	ication) 5			
For furth	her information co	oncerning this matter, please c	all:	# # X			
	Peterson Esp	perance	813 770-4995	22 SEP -6 PH 4: 00			
	Name of	Person		Telephone Number			
Enclose	d is a check for th	e following amount:					
<b>■</b> \$25	.00 Filing Fee	☐ S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Address Registration S		Street Address: Registration Sec	tion			
	Division of C	orporations	Division of Corporations				
	P.O. Box 632 Tallahassee, F		The Centre of T	allahassee Street, Suite 810			
			=115 (4. 1410HIO)	Conver, Durie Will			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BROTHER'S TRANSPORTATION COMPANY, LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.) ability Company)	<del></del>
The Articles of Organization for this Limited Liability Company w	vere filed on 03/07/2022	and assigned
Florida document number L22000115424		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ity company here:	
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		22
		43S
		9 e
Enter new mailing address, if applicable:		<del></del>
(Mailing address MAY BE A POST OFFICE BOX)		<del></del>
		<u> </u>
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	ldress on our records, enter the name	of the new registere
Name of New Registered Agent:		<u>.                                    </u>
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	Ziv 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 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
AMBR	Emmanuel M Daphnis	5050 Aventura Blvd, Orlando FL 32839	🗏 Add
		<del></del>	□Remove
			□Change
			□Add
			□Remove
			□Change
	-		SEP Remove
			□ Remove
			Diange Office of the Change
		-	□Remove
			Change
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				<del>,</del>	<del></del>			
fective date, if othe in effective date is listed	, the date must be spe	cific and cannot	be prior to date	of filing or mor	e than 90 days a	otional) fter filing.) Purst	ant to 605.0	)207
ote: If the date insert ocument's effective da				atutory filing	requirements,	this date will r	ot be listed	d as
ecord specifies a dela is filed.	yed effective date,	but not an effe	ective time, at	12:01 a.m. on	the earlier of:	(b) The 90th	ı day after t	the
		<del></del>	A_1					
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nted		(	//					

Filing Fee: \$25.00