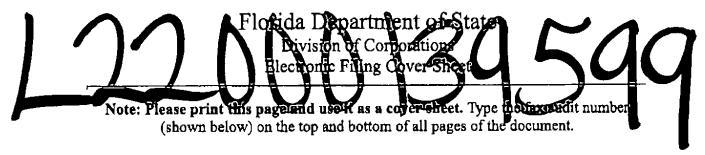
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Division of Corporations



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To:

Division of Corporations

Fax Number

; (850)617-6383

From:

Account Name : LICENSES & PERMITS LLC

Account Number : I20210000155

Phone

: (305)226-8727

Fax Number

: (305)226-8767

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:						
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LOPZ & L TRANSPORTATION LLC

Certificate of Status	0
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M. SOLOMON

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2022 MAY 10 PH I2: 05

COVER LETTER

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expo xxxeor		TRANSPORTATION LLC		
SUBJECT	: <u>_</u>	Name of Lim	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	rn all correspo	ndence concerning this matter	to the following:	
		LUCIA ESTRELLA		
			Name of Person	•
		LICENSES & PERMITS I	LLC	
			Firm/Company	•
		8300 WEST FLAGLER ST	TREET SUITE 114	
			Address	
		MIAMI, FLORIDA 33144		
			City/State and Zip Code	•
		ACRUZ.ACCURATE@GN	AAIL.COM to be used for future annual report notification)	?.
For further	information c	oncerning this matter, please of		
LUCIA ES		,	305 226-8727	
	Name o	f Person	Area Code Daytime Telephone Number	
Enclosed is	a check for the	ne following amount:		
\$25.00	Filing Fee	S30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	te of Status &
R D P.	alling Address egistration Sivision of Co. Box 632 allahassee, I	Section Corporations 17	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303	10

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LOPZ & L TRANSPORTATION LLC			
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on 03/21/2022	and assig	gned
Florida document number L22000139599			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	pility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company " the designation "LLC" or the	abbreviation "L.L.	<u></u>
Enter new principal offices address, if applicable:	12458 SW 220 STREET		
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FLORIDA 33170	1 * c	1022
		 5	.∓ ->
	12458 SW 220 STREET	7.50	017
Enter new mailing address, if applicable:		710.	- <u>-7)</u>
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FLORIDA 33170		<u> </u>
			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the na</u>	une of the new	registere
New Registered Office Address:	Enter Florida street address		
	, Florida _		
	City	Zip Code	
New Registered Agent's Signature, If changing Registered Agent:	i.		

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> Georgina M Candela	Address VIC SIANTOS	Type of Action
AMBR	- Constitution of the Cons		□Add
		12458 SW 220 Street MIAMILA 33170	Remove
			☐ Change
AMBR	Georgina W. Lopez Cand	elano	DAdd
1 1 1000		12458 SW 220 Street	
		Miami, FL 33170	□ Remove
			Change
			OAdd 😤
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ective date, if other than the date of filing	/ <u>*</u>		(optional)	
n effective date is listed, the date must be specific and te: If the date inserted in this block does not m	cannot be prior to date	of filing or more than	90 days after filing.)	Pursuant to 605.020
cument's effective date on the Department of S		raturory minig requi	emens, mis date v	Alli Hot oc hated a
ecord specifies a delayed effective date, but not	an effective time, a	: 12:01 a.m. on the	earlier of: (b) The	90th day after the
is filed.				
ted	11	- .		
led,				
	X LP			
Signature of a r	nember or authorized	representative of a me	mber	