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(Requestor's Name)
(Address)
(,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO:

TO:	Registration Se Division of Cor					
SUBJI	ECT: RIO TRA	NSPORT, LLC				
	<u>, () • () () () () () () () () (</u>	Name of Lim	ited Liability Company			
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return ali correspo	ndence concerning this matter	to the following:			
		Corpor	ate Maintenance Lea	ad		
			Name of Person			
		Proc	essing Department			
			Firm/Company			
		1	450 Vassar St			
		-	Address			
			Reno, NV 89502			
			City/State and Zip Code			
		r malaulla a				
15 (5	at the second		to be used for future annual report notifi	canon		
For Iui	ther information c	oncerning this matter, please co	311:			
	Process	ing Department	at (800) 638-2320			
	Name o	f Person	Area Code Daytime	Telephone Number		
Contra		C. II				
		ne following amount:	Flore on the line of	FIGA OO PILA FA		
四 25	5.00 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)		
	MAHJ	ING ADDRESS:	STREET/COURIE	CR ADDRESS:		
Registration Section		Registration Section Division of Corporations				
Division of Corporations P.O. Box 6327			Clifton Building			

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301



IMPORTANT NOTICE



PLEASE SEND ALL DOCUMENTS –
APPROVED OR REJECTED TO THE ADDRESS
BELOW.

INC AUTHORITY ATTN: CORPORATE MAINTENANCE LEAD

1450 VASSAR ST RENO, NV 89502

OR

RETURNDOCS@INCAUTHORITY.COM

TO: PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING: Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM: Inc Authority, LLC

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE: Wednesday, July 26, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

• Articles of Amendment

For: RIO TRANSPORT, LLC

We have included payment in the amount of \$25.00 for the following fees:

Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RIO TRANS	PORT, LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 04/13/22	and assigned
Florida document number L22000176653		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
GRIFFS AT	MS, LLC	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or t	he abbreviation 4.1.C-7,
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		$\frac{1}{\omega} \frac{2 \frac{3\pi}{2}}{2 \frac{3\pi}{2}}$
		-
Enter new mailing address, if applicable:		2
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	-	nter the name of the no
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid:	:1
	Cur	Zin 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 = 3	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			Remove
			Change
			□ Remove
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		·	Remove
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te: If the d	e, if other than the da te is listed, the date must be ate inserted in this block fective date on the Depa	specific and car does not meet	mot be prior to t the applicab		ore than 90 days		
record sp he 90th (ecifies a delayed e day after the record	fective date is filed.	e, but not	an effective	time, at 12:0)1 a.m. on th	e earlier
ed	July 26	<u> </u>	2023	. •			
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Page 3 of 3

Filing Fee: \$25.00