L22000185302

(Re	questor's Name)	-
(Ad	dress)	
(Ad	dress)	
·		
(Cit	y/State/Zip/Phone	- #)
(0.1.	yrotatorzipii none	. ",
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	<u> </u>
Certified Copies	Certificates	of Status
	_	
Special Instructions to	Filing Officer:	





100405784441

09/31/23--01011--025 *#25.00

64.4 .3 18. 13707

S. ROBERTS MAY 19 2023

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJI	Name of Limited Liability Company
The en	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Kitmur Ganzalez
	MKM Freight LLC
	12233 loval Reef Dr
	Orlando FL 32826. City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
	Name of Person Jalos at (407) 927 9449. Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
□ \$2:	5.00 Filing Fee Solution Solution Status Solut

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

MKM Freig	ht IC
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number $\underline{L22000[65302]}$	
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	2
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "EEC."
Enter new principal offices address, if applicable:	T :
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>
	-
Enter new mailing address, if applicable:	Σ
	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida City
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 Title Name Address Type of Action 18821 Belvedere rd DAGG Augusto A. Martinez MGR Orlando FL 32820 □ Change _____ □Remove □Change □Add _____ Change _____ □Remove _____ □Change □Remove ______ □Change □Remove

_____ □ Change

_	
_	
_	
_	
_	
_	
	
_	
_	
_	
_	<u> </u>
_	
_	
_	
_	***************************************
_	
If an effe Note:	ye date, if other than the date of filing:
rd is tile	
Dated _	$\frac{3 27 2023}{ }$
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member Kiomor Gman UZ

Filing Fee: \$25.00