h22000301353

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	Mait I	MAIL
(Bu	siness Entity Name)	
(Do	ocument Number)	
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07/22/22--01023--021 **30.00

COVER LETTER

Division of Co	rporations			
SUBJECT:	WLM	Transport, LLC		
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
		Lisa Morgan		
		Name of Person		
		WI M Transport, LLC		
		Firm/Company		<u></u>
		1149 NW 16th Court		
		Address		
		Fort Lauderdale, FL 3331	1	
		City/State and Zip Code		
		norgan.lisa0152@gmail.c		
For further information of	concerning this matter, please c		report notification)	
	-		20- 155	
Lisa N	Aorgan —	954 at ()	295-3775	
Name o	of Person	Area Code	Daytime Telephone !	Number
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc	Co losed) Co	0.00 Fifing Fee, crtificate of Status & crtified Copy dditional copy is enclosed)
Mailing Addres	ss:	Street Ac	ldress:	

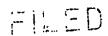
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section

TO:

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 OF



	WLM Tran	asport, LLC		2022 JUL 22 AM 8: 47
(Name of the Limi	ted Liability Compa (A Florida Limited	ny as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited L Florida document numberL22000301353	iability Company		July 6, 2022	TALL AHASSI E. : 1 CHILLE and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:		
NOT APPLICABLE				
The new name must be distinguishable and contain the v	ords "Limited Liabi	lity Company," the design	ation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		N/A		
		N/A		
		N/A	·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A N/A N/A			
B. If amending the registered agent and/or ragent and/or the new registered office address	*		ds, <u>enter the</u>	name of the new registered
Name of New Registered Agent:	N/A		·	
New Registered Office Address:	N/A		ords, <u>enter the name of the new registered</u> a street address , Florida N/A Zip Code	
		Enter Florida st	rcet address	
N/A	N/A		. Floric	ła ^{N/A}
		City	 -	Zip Code
New Registered Agent's Signature, if changing l	Registered Agent:			
I hereby accept the appointment as registere provisions of all statutes relative to the prop- accept the obligations of my position as regi-	er and complete	performance of my a	luties, and I	am familiar with and

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>	Address	Type of Action
President	Lisa Morgan	1149 NW 16th Court Fort Lauderdale, FL 33311	= Add
		Email: morgan.lisa0152@gmail.com	Remove
		954-295-3775	□Change
			🗆 Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
		□ Change	
			□Add
			□Remove
			Change
			□Add
			□Remove
			[]Change

No ot	her information needs to be amen	nded for this LLC.	
			
-	 		
			
·- 			
	-		
Effective da	ite, if other than the date of fi	iling: (optional)	
		c and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0	
	date inserted in this block does no effective date on the Department of	not meet the applicable statutory filing requirements, this date will not be listed of State's records.	as u
e recora spec rd is filed.	thes a delayed effective date, but	not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t	ine
id is filed.			
	July 6	2022	
Dated	——————————————————————————————————————		
	() Janto	165	
	Signature o	of a member or authorized representative of a member	
		Lisa Morgan	
		Typed or printed name of signee	

Filing Fee: \$25.00