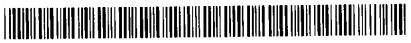
8/18/22, 1:40 PM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000280456 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SU SEGURO INSURANCE GROUP LLC

Account Number : 120210000126 : (785)857-7718 Phone : (407)386-6369 Fax Number

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

KAREM@SUSEGUROINSURANCE.COM Email Address:\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NAVARITT TRANSPORT LLC

Certificate of Status	0
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## H220002804563

## COVER LETTER

TO: Registration Sec Division of Corp			
	TRANSPORT LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
		ZOMAYRA I. SANTOS	
		Name of Person	
		Zomayra Santos Firm/Company	
		Firm/Company	
		4323 BRIDGEDALE RD	
		Address	
		PENSACOLA	
		City/State and Zip Code	
		FLORIDA 32505	
		to be used for future annual report noti-	fication)
For further information co	oncerning this matter, please ca	all:	
ZOMAYR.	A L SANTOS	570 5995091 at ()	
Name of	Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
	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 Addres Registration 5 Division of C P.O. Box 632 Tallahassee, 1	Section orporations 7	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations °allahassee e Street, Suite 810

To:

H22000280456 3

14072306072

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		ANSPORT LLC		
(Name of the Lin	(A Florida Limited I	ny as it now appears on our records.) Jability Company)		
The Articles of Organization for this Limited	Liability Company	were filed on 07/11/2022	and assigned	
lorida document numberL2200030841	.4			
his amendment is submitted to amend the fo	Howing:			
A. If amending name, enter the new name	of the limited liab	ility company here:		
N/A				
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the designation "LLC" or t	he abbreviation "L.L.C."	
Enter new principal offices address, if appl	icable:			
(Principal office address MUST BE A STREET ADDRESS)		4323 BRIDGEDALE RD PENSACOLA, FL 32505		
	<u>-</u>			
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE	( BOX)	4323 BRIDGEDALE RD PENSAC	OLA, FL 32505	
	<u> </u>		<del></del>	
B. If amending the registered agent and/or		iddress on our records, enter the	name of the new registered	
agent and/or the new registered office addr	ess here:		022 SEC	
Name of New Registered Agent:	SANTOS, ZON	1AYRA I. 		
New Registered Office Address:	4323 BRIDJED	DALE RD .		
		Enter Florida street address	11 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
	PENSACOLA	. Florida	205041.7	
		City	· Ziu 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.

> Zomayra Santos If Changing Registered Agent, Signature of New Registered Agent

1122000280456.3

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Τo

<u>Title</u>	Name	Address	Type of Action
MGR	SANTOS, ZOMAYRA L	4323 BRIDGEDALE RD PENSACOLA, FL 32505	🗆 Add
			□Remove
			□ Add
			🗆 Remove
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(t) an effective date is listed, the date mu	st be specific and cannot be prior t lock does not meet the applica	(optional) o date of filing or more than 90 days after filing.) Pursuant to 60 ble statutory filing requirements, this date will not be lis	)5.0207 sted as
he record specifies a delayed effective ord is filed	ve date, but not an effective tin	ne, at 12:01 a.m. on the earlier of; (h). The 90th day aft	er the
Dated	2022	entos nzed tepresentative of a member	
	~ ~		

2022-08-20 15:43:38 GMT

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From, Karem Sanchez

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To: