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COVER LETTER

TO: Registration Division of C	Section Corporations		
	insport L.L.C		
SUBJECT:	Name of Lim	ited Liability Company	.
The enclosed Articles	of Amendment and fee(s) are sub	emitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Aimee Moyet		
		Name of Person	····
	Nelz Transport L.L.C		2022 DEC .EGRET
		Firm/Company	——- 28年1月
	12		
		Address	
	Kissimmee, FL 34741		2: 4
	aimee.moyet@gmail.com	City/State and Zip Code	5
	E-mail address: (to be used for future annual report notific	ation)
For further informatio	n concerning this matter, please c	all:	
Aimee Moyet		401 573-9755 at ()	
Nan	ne of Person		l'elephone Number
Enclosed is a check for	or the following amount:		
■ \$25.00 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)
P.O. Box 6	n Section f Corporations	Street Address: Registration Sect Division of Corporate Centre of Ta 2415 N. Monroe Tallahassee, FL 3	orations Ilahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Co (A Florida Lim	mpany as it now appited Liability Compar	y)			
The Articles of Organization for this Limited Liability Comp.	oany were filed on	October 3, 2022	ar	nd assig	gned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited	liability company	here:			
The new name must be distinguishable and contain the words "Limited I	,iability Company," tl	ne designation "LLC" or	the abbreviati	on "L.L.	C."
Enter new principal offices address, if applicable:					
Principal office address MUST BE A STREET ADDRESS	<u> </u>				
		· 	(6)	20/2	
Enter new mailing address, if applicable:			WELL Skell	2 DEC	– پ
*				2	
Mailing address MAY BE A POST OFFICE BOX)			- 1 - 1	-0	
3. If amending the registered agent and/or registered off	ice address on ou	r records enter the	name of th	5: [raniet
ngent and/or the new registered office address here:	ice address on ou	records, <u>enter the</u>	name or th	ic new	102150
Name of New Registered Agent:					
New Registered Office Address:	Enter	Florida street address			
		, Florid	la		
-	City		iaZip	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 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 	er.

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Nelson A. Moyet	2201 Palmetto Glen Dr. Apt 204	= Add
		Kissimmee, FL 34741	□Remove
			□Change
			⊐Add
			Remove 2022 GChange, TALL
			Add Remove
			☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
			□ Add
			□Remove
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			□ Change

						
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