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(Requestor's Name)
(Address)
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(Document Number)
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A. RIVERS
JAN 2 4 2023



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COVER LETTER

: Registration Se Division of Cor			
Casiva Aut	o Transport LLc.		
вјест:	Name of Lim	ited Liability Company	
ne enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
ease return all correspo	ondence concerning this matter	to the following:	
	Cassidy Eversull		
	·	Name of Person	
	Casiva Auto Transport LL	c.	
		Firm/Company	
	3420 NW 45th Ave.		
		Address	
	Cape Coral Florida 33993		
		City/State and Zip Code	
	sparksnv100@gmail.com		-, <u>-</u>
or further information c	h-mail address: (oncerning this matter, please e	to be used for future annual report no all:	dification)
assidy Eversull		775 771-5470	
Name o	l'Person	Area Code Daytii	me Telephone Number
nclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	■ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration S		<u>Street Address:</u> Registration S	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	
Tallahassee, I	にし 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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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.

mending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added emoved from our records:

GR = N $ABR = A$	lanager Authorized Member		
<u>tle</u>	<u>Name</u>	Address	Type of Action
MBR	Ana I Eversull	3420 NW 45th Ave. Cape Coral Fl 33993	□Add
			Remove

 	 L Add
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	 □Change
 	 □Add
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	ormation, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
	
Note: If the date inserted in t	n the date of filing:
e record specifies a delayed ef d is filed.	fective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
November 2 Dated	2022
7atCtl	
	Signature of a member or authorized representative of a member
Cassidy Eversulf	

Filing Fee: \$25.00