L22000523935

Florida Department of State
Division of Corporations
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Account Name : RC TAX SERVICE LLC
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MH TRANSPORTATION USA LLC

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K. SALY

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: MH TRANSPORTATION USA LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

FRANKLIN AYAIN MORALES
Name of Person

MH TRANSPORTATION USA LLC
Firm/Company

3654 SW 162 AVE
Address

MIRAMAR, FL 33027
City State and Zip Code

mhtusa2023@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VANESSA HURTADO CASAS at (+1 407-577-0412)
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for 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)

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

StreetAddress:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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TALLAHASSEE FLORIDA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MH TRANSPORTATION USA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/14/2022 and assigned Florida document number L22000523935.

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 Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

2051 Renaissance Blvd
APT 205
MIRAMAR, FL, 33025

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

2051 Renaissance Blvd
APT 205
MIRAMAR,FL, 33025

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: TERRERO SANCHEZ, ADOLFO IRAK

New Registered Office Address: 2051 Renaissance Blvd APT 205
Enter Florida street address

ORANGE CITY, Florida 32763
City *Zip 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.

DocuSigned by:
Adolfo Terrero
If Changing Registered Agent, Signature of New Registered Agent

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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
AMBR	Terrero Sanchez, Adolfo Itaik	2051 Renaissance Blvd	■ Add
		APT 205	☐ Remove
		Miramar, FL 33025	☐ Change
AMBR	Hurtado Casas, Vanessa	3854 SW 162ND AVE	☐ Add
		MIRAMAR, FL, 33027	■ Remove
			☐ Change
AMBR	Morales, Franklin Ayain	3854 SW 162ND AVE	☐ Add
		MIRAMAR, FL, 33027	■ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed

Dated 08/05/2024

Signed by:
[signature]
63E17F5DED054C6...
Signature of a member or authorized representative of a member

VANESSA HURTADO CASAS
Typed or printed name of signee

Filing Fee: $25.00