## L23000020384

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	Address)	
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## **COVER LETTER**

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	P Transport L.L.C.	4	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articl	es o.  are sub	omitted for filing.	
Please return all cor	respondence concerning this matter	to the following:	
	Dana Marder		
		Name of Person	<del></del>
		Firm/Company	
	1460 Turkey Roost Trail		
	· 11	Address	·
	Tallahassee, FL 32317		73
		City/State and Zip Code	
	dana.marder@gmail.com		
	E-mail address:	(to be used for future annual report noti	7
For further informa	tion concerning this matter, please of	call:	
Dana Marder		850 284-6911 at ()	<u>د.</u> در
N	lame of Person	Area Code Daytim	e Telephone Number
Enclosed is a check	c for the following amount:		
■ \$25.00 Filing F	Fee S30.00 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)
<u>Mailing A</u>		Street Address:	
_	tion Section	Registration Se Division of Co	
P.O. Box	r of Compensions x 63 °m	The Centre of	

Tallahasses, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DERP Transport L.L.C.				
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our rec- liability Company)	ords.)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000020384</u>	were filed on 1/9/2023	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enterthe new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "L	LC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	: 23		
Enter new mailing address, if applicable:		. <del>.</del>		
(Mailing address MAY BE A POST OFFICE BOX)				
	-	57.5		
		·		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:				
	Enter Florida street address			
	, Florida			
New Registered Agent's Su nature, if changing Registered Agent:	City	Zip Code		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ree to act in this capacity. It performance of my duties, provided for in Chapter 60	, and I am familiar with and 15, F.S. Or, if this document is		

H 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>Narę</u>	Address	Type of Action
AMDB	Dana Marder	1460 Turkey Roost Trail	□Add
		Tallahassee, FL 32317	■Remove
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			□Add
	Ŀ		□Remove
			□Change
			. ⊋; 
			⊡Remove
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ctive date, if other than to effective date is listed, the date is 1 If the date inserted in this ment's effective date on the	nust be specific and cann block does not meet t	he applicable stat	filing or more than 9 utory filing require	(option: 0 days after fill ments, this d	ing.) Pur	suant to 605 not be liste
ord specifies a delayed affectiled.	rtive date, but not an e	ffective time, at 1	2:01 a.m. on the ea	rlier of: (h)	The 90	th day after
d	20	)23				
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			7 /- presentative of a men	1/23		

Filing Fee: \$25.00