

L23000057331

Florida Department
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : SORSHER & ASSOCIATES, LLC.
Account Number : I20170000056
Phone : (954)842-2931
Fax Number : (954)842-2936

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SAF CARGO TRANS LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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Corporate Filing Menu

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2023 FEB 14 PM 2:35

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ☒ SAF CARGO TRANS 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:

SAFARIAN, OLEH

Name of Person

SAF CARGO TRANS LLC

Firm/Company

2419 WASHINGTON STR.

Address

HOLLYWOOD, FL 33020

City/State and Zip Code

safarianoleg2018@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SAFARIAN, OLEH

786

834-0416

at ()

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)

Mailing Address:

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

Street Address:

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

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

[illegible]

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

[illegible]

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 02/13, 2023

Olak Safarian
Signature of a member or authorized representative of a member

SAFARIAN, OLEH

Typed or printed name of signee

Filing Fee: \$25.00