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(((H23000102039 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAXMY'S CARRIER SERVICES

Account Number : I2004000007 Phone : (305)640-0281 Fax Number : (305)489-2902

\*\*Enter the email address for this business entity to be used for future

annual report mailings, Enter only one email address please. \*\*

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **4 CARRIERS LLC**

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T. LEMIEUX MAR 1 7 2023 To:

## **COVER LETTER**

Division of Cor			<i>t</i>
4 CARRIE	RS LLC <sup>*</sup>		• 3
SUBJECT:	Name of Lim	ited Lizbility Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JANETTE APERDOMO		
		Name of Person	
	4 CARRIERS LLC		
		Firm/Company	
	130 BONAVENTURS BL	VD APT 204	
		Address	<del></del>
	WESTON FL 33326		
	<del>- ,. ,. ,</del>	City/State and Zip Code	
	GAIL.LAXMYSCARRIER E-mail address: (	@GMAHCOM to be used for future annual tepor	t notification)
For further information of	oncerning this matter, please c		·
LAXMY CHACON		305 640028	1
Name o	rf Person	Area Code D	l aytime Telephone Number
Enclosed is a check for t	he following amount:		
国 \$25.00 Filing Fee	☐ 530.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &
Mailing Address Registration		Street Addre Registration	
Division of C	Corporations	Division of	Corporations

P.O. Box 6327 Tallahassee. FL 32314 The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303

#### From: LAXMY CHACON

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

4CARRIERS LLC			
( <u>Name of the Limited Liability</u> (A Florida	y Company as It now appears on Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on	13/2023	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company here:		
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the design	nation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			· · · ·
(Principal office address MUST BE A STREET ADDRE	<u>ESS)</u>		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			
		<del>-</del> :	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our recor	rds, <u>enter the name o</u>	f the new register
Name of New Registered Agent:			<u> </u>
New Registered Office Address:			<u>ာ</u> ယု
A TO STORE OF THE STATE OF THE	Enter Florida s	treet address	22
<u></u>		, Florida	
	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.

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

To:

<u>Title</u>	Name	Address	Type of Action
MGR	CASTELO, RODRIGO J	304 INDIAN TRACE UNIT 127	□ Add
		WESTON, FL 33326	≅Rcmove
			I]Change
			Remove
		der erschendeligt han der erschendeligt han der erschendelige der erschendelige der erschendelige der erschend	(I) Change
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			□Remove
			Chanca

II aine	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(lf an e Note:	tive date, if other than the date of filing:
re reco	ird 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 field.
Dated	MARCH 17TH . 2023
	Signature of a morpher or authorized representative of a member
	PERDOMO LOPEZ, JANETTE A