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To:

Division of Corporations

Fax Number : (850)517-6383

From:

Account Name : ITAX GROUP, LLC Account Number : I20140000115 Phone : (813)882-8426 Fax Number : (813)884-0263

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 M&E TRANSPORTATION LLC

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JUN 20 2023

COVER LETTER

TO:- R	egistration Se ivision of Cor	ction porations		Sur Francisco de Companyo de C		
SÉBJECT	M&E TRA	NSPORTATION LLC		•		
SUBJECT	· _ `	Name of Lim	ited Liability Company			
The enclose	sed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please retu	ım all correspo	ndence concerning this matter	to the following:			
	•	MAURICIO J SALAS				
			Name of Person	•		
		M&E TRANSPORTATIO	N LLC			
			Firm/Company			
		11920 ROSE HARBOR D	R, APT #208			
			Address			
		TAMPA, FL 33625				
			City/State and Zip Code			
		METRANSPORTATION?	@GMAIL.COM	• • •		
		E-mail address: (to be used for future annual report n	otification)		
For further	information c	oncerning this matter, please c	all:	-		
MAURIC	IO J SALAS	·	813 834-2754 at ()	·		
	Name o	f Person	Area Code Days	inie Telephone Number		
				•		
Enclosed i	s a check for th	e 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)		
	lailing Addres		Street Address;			
	egistration S		Registration S			
	ivision of C .O. Box 632		Division of Corporations The Centre of Tallahassee			
	allahassee, I			roc Street, Suite 810		

Tallahassee, Fl. 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M&E TRANSPORTATION LLC			
(Name of the Limited Liability (A Florida I	Company as it now appear limited Liability Company)	s on our record	<u>ls.</u>)
The Articles of Organization for this Limited Liability Co	mpany were filed on 01/	24/2023	and assigned
Florida document number L23000043814	_•	- j	
This amendment is submitted to amend the following:		Ü	
A. If amending name, enter the new name of the limit	ed liability company he	ere:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the d	esignation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u></u>		
		- :	
Enter new mailing address, if applicable:		```	
(Mailing address MAY BE A POST OFFICE BOX)		:	<u> </u>
			20
		. 1	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our re	ecords, enter	the name of the new registered
agent and/or the new registered office address here.		•••	$\hat{\omega}$
			<u></u>
Name of New Registered Agent:		· ; "	
New Registered Office Address:		, 	ယ္
	Enter Flor	ido-street addres	ss
·		, FI	orida
	Clty	. :	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.

16 77 V 1 25 1 4

If amending Authorized Person(s) authorized to manage, enter the title, panie, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address		Type of Action
AMBR	SILVA, ELAINE A	655 KNOLLWOOD DR	<u></u>	□Add
		DAVENPORT, FL 33837	· ·	■Remove
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ctive date, if other i	han the date	of filing:		***	(opti	onal)	
effective date is listed, th <u>e:</u> If the date inscrted	e date most be spe in this block do	edic and cannot? ies not meet the	ne prior to date of a applicable statu	tory liting coau	n 90 days aner irements, thi	rning.) Pursuanti i date will not b	o ous.uu c fisted a
ument's effective date	on the Departm	ient of State's re	ceords.				
ord specifies a delaye	l effective date.	but not an effec	ctive time, at 12	:01 a.m. on tale	earlier of: 1b) The 9(ah day	after th
filed.							
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MAURICIO J	0 41 40						