

L23000055821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

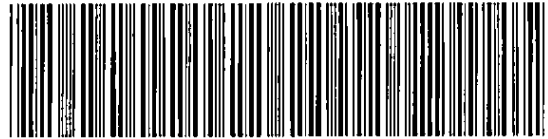
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/18/23--01025--001 **25.00

2023 MAY 18 AM 8:11
05/18/23

A. RIVERS

JUL 18 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EPM Transportation 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:

BETTY LOUIS
Name of Person

EPM Transportation LLC
Firm/Company

1856 Alyssa Way
Address

ALVIN, TX 77511
City/State and Zip Code

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

For further information concerning this matter, please call:

BETTY LOUIS at (954) 914 0977
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

EPM Transportation 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 1/30/2023 and assigned Florida document number L23000055821

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**)

2630 W Broward Blvd
Suite 203-2072
Fort Lauderdale, FL 33312

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

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:

Betty Louis

New Registered Office Address:

2630 West Broward Blvd

Enter Florida street address

Fort Lauderdale, Florida 33312
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.

Betty Louis
If 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>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|--------------------|----------------------|---|
| MGR | Mathieu E, Phesien | 1856 Alyssa way | <input type="checkbox"/> Add |
| | | Alvin, TX. 77511 | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change <i>12/</i> |
| MGR | Mathieu, Ephesien | 1856 Alyssa way | <input checked="" type="checkbox"/> Add <i>BC</i> |
| | | Alvin, TX. 77511 | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change <i>Bi</i> |
| AMBR | Louis, Manouchka | 11125 NW 37th street | <input type="checkbox"/> Add |
| | | Sunrise, FL 33351 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Louis, Manouchka | 1856 Alyssa way | <input checked="" type="checkbox"/> Add |
| | | Alvin, TX. 77511 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AP | Louis, Betty | 1856 Alyssa way | <input type="checkbox"/> Add |
| | | Alvin, TX. 77511 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | Louis, Betty | 1856 Alyssa way | <input checked="" type="checkbox"/> Add |
| | | Alvin, TX. 77511 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |

[illegible]

(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)

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 3/23/2023.

Beifügen

Signature of a member or authorized representative of a member

Betty Louis

Typed or printed name of signee

Filing Fee: \$25.00