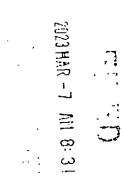
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A EUTLER
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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE		TRANSPORT LLC		
JODAL		Name of Lin	nited Liability Company	
		Amendment and fee(s) are sub ondence concerning this matter	_	
		DAHIYANA CESPEDES	STAMAYO	
			Name of Person	
		AMBR		
			Firm/Company	
		907 NE 10TH TERR		
			Address	
		CAPE CORAL, FL 33990		
		1-	City/State and Zip Code	
		DAHIYANCESPEDES@C		
For furt	her information e	oncerning this matter, please c	to be used for future annual report notif all:	ication)
DAHIY	'ANA CESPEDE	S TAMAYO	561 932-7738	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne 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 radditional copy is enclosed:
	MAILI	ING ADDRESS:	STREET/COURIE	ER ADDRESS:

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

The state of the s

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

AA RUIZ TRANSPORT LEC

2023 HAR -7 AH 8: 31

(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our ted Liability Company)	records.)		
The Articles of Organization for this Limited Liability Comparison document number $\frac{1.23000087534}{2.000087534}$.	any were filed on FLORIDA	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited I	iability company here:			
The new name must be distinguishable and contain the words "Limited I.	iability Company," the designatic	on "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	907 NE 10TH TERR			
(Principal office address MUST BE A STREET ADDRESS	CAPE CORAL, FL 33909			
	·			
Enter new mailing address, if applicable:	907 NE 10TH TERR	907 NE 10TH TERR		
(Mailing address MAY BE A POST OFFICE BOX)	CAPE CORAL, FL 33909			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address b	office address on our r	ecords. enter the name of the		
Name of New Registered Agent: DAHIYAN.	A CESPEDES TAMAYO			
New Registered Office Address: 907 NE 101	H TERR			
	Enter Florida street address			
CAPE COR	AL	Florida = 33909 Zip Code		
	City	Zip Code		

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.

gent, Signature of New Registered Agent

Page 1 of 3

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>	Address	Type of Action
AMBR	DAHIYANA CESPEDES TAMAY ■	907 NE 10TH TERR	
		CAPE CORAL, FL 33909	
			■ Change
			□ Remove
			Change
			Add
			□ Remove
			Change
		-	☐ Remove
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Effective date, if other than the flan effective date is listed, the date me	e date of filing:	handing las deli-	10)	otional)
Note: If the date inserted in this bedocument's effective date on the f	lock does not meet the	applicable statutory	filing requirements, t	his date will not be listed
ne record specifies a delaye The 90th day after the rec	d effective date, b cord is filed.	out not an effect	ive time, at 12:0:	l a.m. on the earlier
Dated	11:00	DAM .		
100				
, ((C	>			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00