L23000184695

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration Section Division of Corporation	18			
SUBJECT: PAPA'S TRANS	SPORT, LLC Name of Limi	ited Liability Company		
The enclosed Articles of Amenda	nent and fee(s) are sub-	mitted for filing.		
Please return all correspondence of	concerning this matter	to the following:		
_	Corpora	ate Maintenand	c <u>e Lead</u>	
		Name of Person		
	Proce	essing Departi	ment	
		Firm/Company		
<u></u>	1	450 Vassar S	St	
		Address		
		Reno, NV 89502	2	
		City/State and Zip Code		
	F-mail address: ft	o be used for future annual r	coor nautication	,
For further information concerning			eport nemication)	
Processing D	epartment	at (800) 638	8-2320	
Name of Person	 -	Area Code	8-2320 Daytime Teleph	ione Number
Enclosed is a check for the follow	ing amount:			
	0.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encle		3 \$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/COURIER ADDRESS:

Registration Section Division of Corporations Clitton Building 2661 Executive Center Citele Tallahassee, FL 32301 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>	Name	Address	Type of Action
MGR	Brenda Fruster	.5102 Rolling Hill Ct	
		Tampa Terrace, FL 33617	Remove
			Change
MGR	Tonya McLeod	_5.1.0.2 Rolling Hill Ct	
		Tampa Terrace, FL 33617	Remove
			Change
			Remove
			Change
······································			D Add
			Remove
			Change
			Remove
			Change
			□ Remove
			Change

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PAPA'S TRAN		
(Name of the Limited Liability Compa (A Florida Limited)	my as it now appears on our records.)	
(A Ciorida Elimete)	Chibanty Company)	
The Articles of Organization for this Limited Liability Company	were filed on 04/13/23	and assigned
Florida document number L23000184695		
Tierka document hamber		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ilitu aammanu bana.	
A. If antending name, enter the new name of the manted hab	unty company nere:	
The second secon		
The new name must be distinguishable and contain the words "Limited Liabil	hty 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)		Z023 AUG SEGREI TALL
		25 2
		AST TO
Enter new mailing address, if applicable:	•	
		——————————————————————————————————————
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>
5		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on our records, <u>er</u>	ater the name of the new
is a series agent amount the new registered outlee address then	<u>c</u> .	
M. CM. B. C. L.		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Floridu street address	
	, Florid	9
	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.

It Changing Registered Agent, Signature of New Registered Agent

Ifame	inding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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Note:	we date, if other than the date of filing: N/A (optional) serive 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as them's effective date on the Department of State's records.
he rec The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated .	Angust 15, 2023.
	Lobort Muser
	Signature of a member & authorized representative of a member
	Robert Fruster
	Lyped or printed name of signee

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Filing Fee: \$25.00