## 23000192768

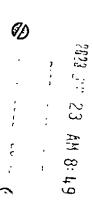
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## DocuSign Envelope ID: FC184F0B-042B-47C1-9243-A1153665B9F2 COVER LETTER

TO: Registration Se Division of Cor			•
	TRANSPORT LLC		
SUBJECT:	Name of Lim	ited Liability 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:	
	EDUARDO ROBERTO L	ONGA	
		Name of Person	•
		Firm/Company	
	1230 SW 130TH AVE		
		Address	
	MIAMI, FI. 33184		
	fjbauto@hotmail.com	City/State and Zip Code	
For further information of	E-mail accress: (concerning this matter, please c	to be used for future annual repor	t notification)
EDUARDO ROBERTO		305 345-98-	45
Name o	of Person	at () Area Code D	aytime Telephone Number
Enclosed is a check for the	he 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)
<u>Mailing Addres</u> Registration		<u>Street Addre</u> Registration	
Division of C	Corporations	Division of	Corporations of Tallahassee
P.O. Box 632 Tallahassee.			onroe Street, Suite 810

Tallahassee, FL 32303

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FJB AUTO TRANSPORT LLC

(Name of the Limited Liability Company as it now appears on our records.) 123 AM 8:56

(A Florida Limited	Liability Company)	17 701, 2,0	HII G. 30
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000192768</u>	y were filed on <u>04/19/20</u>	)23	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	bility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designa	tion "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our record	s, <u>enter the nam</u>	ne of the new register
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida str	eet address	
New Registered Office Address:	Enter Florida str	eet address , Florida	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.

If Changing Registered Agent, Signature of New Registered Agent

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II amending Authorized rerson(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	ALBERTO SERPA SANTANA	1230 SW 130TH AVE	□∧dd
		MIAMI, FL 33184	■Remove
			□Change
AMBR E	EDUARDO ROBERTO LONGA	1230 SW 130TH AVE	■Add
		MIAMI, FL 33184	□Remove
			□Change
			□∧dd
			□Remove
			□Change
			□Add
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. If amending any other informa	nion, enter change(s) he	сте: (мнасп ааано	ни внееть, 13 несеsse	и у. ј
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Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the I	st be specific and cannot be pr lock does not meet the app	licable statutory filing	(options) ore than 90 days after filiggrequirements, this days	ng.) Pursuant to 605.0207 (3
ne record specifies a delayed effecti- ord is filed.	ve date, but not an effective	e time, at 12:01 a.m. c	on the earlier of: (b)	The 90th day after the
Dated JUNE 23	2023			
Docustaned by:		<del></del> -		
CARCSESRORREAAC	Signature of a member or at	thorized representative	of a member	
EDUARDO ROBERTO	O LONGA			
	Typed or pr	inted name of signee		<del></del>