## L23000 262276

(Requ	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Name)	
(Docu	ment Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fil	ing Officer:	
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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

BUSIGO TRANSP	PORT, LLC	
Please Debit FCA00	00000003 For: 25	
Thank you Seth Nec	eley	
1451	<del></del>	Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art, of Amend, File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
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Stall	<u>/</u>	Fictitious Owner Search
Signature		Vehicle Search
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Requested by:		UCC 11 Search
Name	Date Time	UCC 11 Retrieval
Walk-In	Will Pick Up	Courier



September 8, 2023

CAPITAL CONNECTION

SUBJECT: BUSIGO TRANSPORT, LLC

Ref. Number: L23000262276

We have received your document for BUSIGO TRANSPORT, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Correct the title of Anarilis.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

2023 SEP 13 FM

Letter Number: 823A00020649

## ARTICLES OF AMENDMENT .TO ARTICLES OF ORGANIZATION **OF**

BUSIGO TRANSPORT, LLC

2023 SEP 13 AH 9: 19

(Nume of the Lin	(A Florida Limited Liability	now appears on our record Company)	<u>s.</u> )
The Articles of Organization for this Limited Florida document number L23000262276		1-11	Wilseche b
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability co	mpany here:	
The new name must be distinguishable and contain the	words "Limited Liability Com	pany," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if a pl			
(Principal office address MUST BE A STRE			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	E BOX)		
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office address ess here:	s on our records, <u>enter t</u>	the name of the new register
Name of New Registered Agent:	FIGCO ACCOUNTING	G FIRM - WANDY FIGU	EROA
New Registered Office Address:	821 HERNDON AVE	141236	
		Enter Florida street address	
	ORLANDO	Flo	rida <u>32814</u>
•	City	, F10	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.

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>	Address	Type of Action
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Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this bidocument's effective date on the D	st be specific and cannot be prior to date of lock dues not meet the applicable sta	(option of filing or more than 90 days after filtutory filing requirements, this of	lina A Duas	uant to 605,02 not be listed	!07 ( as t
record specifies a delayed effectived is filed.	ve date, but not an effective time, at	12:01 a.m. on the earlier of: (b)	The 90t	h day after th	1 <b>e</b>
Dated	2023				
	Signzi are of a member or authorized re				