

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
	Imills :
·	Office Use Only



02/09/24--01004--003 **25.00



February 22, 2024

CYNTHIA MAYERS 7958 PINES BLVD #121 PEMBROKE PINES, FL 33024 US

SUBJECT: PROSPER TRANSPORTATION SERVICES, L.L.C.

Ref. Number: L23000289719

We have received your document for PROSPER TRANSPORTATION SERVICES, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Wanite A Mills Regulatory Specialist II

Letter Number: 324A00003952

Ree 3129

COVER LETTER

TO: Registration Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT: FRO	SPER TRAN	SPORIATION SE	Rures L.L.C
The enclosed Anicles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	<u>Cyw</u> TH	1A MAYERS Name of Person	
		Firm/Company	
	7958 PIN	JES BIVA世15 Address	21
	PEMBROL	CE PINES, 7L 3	33024
	- 4	VCSO YAHOO, to be used for future annual report noti	
For further information c	oncerning this matter, please ca	all:	,
CyNTH1 Name o	A HAYERS	at (786) 379. Area Code Daytim	- 8378 c Telephone Number
Enclosed is a check for th	ne following amount:		
S25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	 S60.00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclosed)
Mailing Address Registration S Division of Co	Section	Street Address: Registration Sec Division of Con	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

The Articles of Organization for this Limited Liability	Company were filed on $\frac{6/5/2023}{}$ and assigned
Florida document number <u>L 236602</u>	89.719
This amendment is submitted to amend the following	
A. If amending name, enter the new name of the li	
PROSPER TRANSPOR The new name must be distinguishable and contain the words "L	INTION SERVICES LLC imited 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 AD	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our records, <u>enter the name of the new registered</u> :
Name of New Registered Agent:	CYNTHIA MAYERS
New Registered Office Address:	7958 fines BIVD ±121 Enter Florida street address
	PEMYSROKE PINES Plorida 33024 City Zip Code
New Registered Agent's Signature, if changing Register	red 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
MGR	ASHTION MAYERS	1200 ST. CHARLES PL PEMBRUKE PINES, 7/33026	_ [ZAdd
			□Remove
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	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
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`an effe \ote:	ve date, if other than the date of filing:
is file	
ated _	3/18/24. Country Cares Signature of a member or authorized representative of a member
	Cittin Placera
	Signature of a member or authorized representative of a member

REQUEST:

PROSPER TRANSPORTION SERVICES
L. L. C

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PROSPER TRANSPORTATION SERVICES
LLC