L23000381345

(Requestor's Name)
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(,
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(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration Se Division of Cor		•	
suвјест: <u>Д</u> С	Cargo LLC Name of Limit	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ondence concerning this matter t	o the following:	
	David	Sonzalez Name of Person Firm/Company	
	5221 Wes	+ Hillsborn BLV	O, APTIOZ
	Coconut david I 600 F-mail address: (1)	Creek, FL 33073 City/State and Zip Code 2alezm9369mcu to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca		
David 6	onzalez of Person	at (<u>954</u>) <u>821 - 6</u> Area Code Daytimo	849 e Telephone Number
Enclosed is a check for t	the 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 (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WG Cargo	LLC	4-491 0 18 7/18:06
(Name of the Limited Blabilit (A Florida	y Company as it now appears (Limited Liability Company)	08/14/2023/\delta
The Articles of Organization for this Limited Liability Co	ompany were filed on	1 27 2023 and assigned
Florida document number <u>L 23 00038 1345</u>	_·	•
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here	<u>:</u> :
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		17
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our rec	ords, enter the name of the new register
Name of New Registered Agent:		<u></u>
New Registered Office Address:	Enter Floric	la street address
		, Florida
	Сиу	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 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
HGR	Patricia Reyes	5221 W Hillsboro BLUD, APTIOZ COCONUT Creek, FL 33073	🗹 Add
			□Remove
			□Change
			□Add
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iun effe Note:	ve date, if other than the date of filing: 12/11/2023 (optional) etive 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 ent's effective date on the Department of State's records.
	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
d is fil	Documber 11 2023
d is fil	ed.