L23000462909

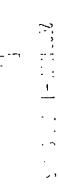
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COVER LETTER

Registration Section Division of Corporations

TO:

	ansportation Lle			
SUBJECT:	Name of Limited Liability Company			
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	Isachy Rumbaut			
		Name of Person		
	Peter Pan Transportation I	.lc		
		Firm/Company		
	1920 Barbados RD			
		Address		~
	West Palm Beach FI 3340	6		·
	City/State and Zip Code			
	peterpantransportation l@g			
	E-mail address: (to be used for future annual report not	ification)	
For further information eo	neerning this matter, please c	all:		
Isachy Rumbaut		561 913 7128		() () () () () () () () () ()
Name of	Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
Mailing Address: Registration So		Street Address: Registration Sc	ection	
Division of Co	rporations	Division of Co	porations	
P.O. Box 6327 Tallahassee Fl		The Centre of T	Fallahassee se Street Suite 81	0

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Peter Pan Transportation Llc

company has been notified in writing of this change.

(Name of the Limited Liability Cor (A Florida Limit	npany as it now appears on our reco ed Etability Company)	rds <u>.</u>)
The Articles of Organization for this Limited Liability Comparing Florida document number 1.23000462909	any were filed on 10/06/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company." the designation "LI	"C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		7
		, <u>, , , , , , , , , , , , , , , , , , </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		* 1
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	ce address on our records, <u>entc</u>	er the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ess
	F	Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Age	nt:	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offi	ete performance of my duties, on sprovided for in Chapter 605	and I am familiar with and, F.S. Or, if this document is

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	Isachy Rumbaut	1920 Barbados RD West Palm Beach Fl 33406	≅ Add
			⊑Remove
			🗆 Change
			🗆 Add
			□Remove
			🗆 Change
			⊇∧dd
		··	#-Remove
			Change
			. ා □Add
			= Remove
			□Change
			🗆 Add
			ZRemove
			∐Change
46×			□Add
			⊒Remove
			□Change

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	··· 5)
ective date, if other than the date of filing:	(optional)
n effective date is listed, the date must be specific and cannot be pi	(optional) rior to date of filing or more than 90 days after filing.) Pursuant to 605.0 blicable statutory filing requirements, this date will not be listed
cument's effective date on the Department of State's recor	
scord specifies a delayed effective date, but not an effective filed.	e time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
10/26 2023	
De	L
	uthorized representative of a member

Filing Fee: \$25.00