. To:

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ELITE CARGO SOLUTIONS LLC

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COVER LETTER

	Registration Se Division of Cor			
eno ma		RGO SOLUTIONS LLC		
SUBJEA	<u>. </u>	Name of Limi	ted Liability Company	
The encl	osed Articles of	Amendment and fee(s) are subt	nutted for filing	
Please re	tuin all correspo	ondence concerning this matter t	to the following:	
		Mike Town		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		9900 Spectrum Dr		
		Address		
		Austin, TX 78717		
			City/State and Zip Code	
		talleyine@gmail.com E-mail address. (t	o be used for future annual report notifi	cauon)
For furth	er information o	oncerning this matter, please ca	11-	
Mike To	nwn		800 773-0888	
	Name o	f Person	at ()	Telephone Number
Unclosed	Lis a check for th	ne following amount		
\$25,6	00 Filmy 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 muditional copy is enclosed)
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Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

From: Rajiv Srivastava

. To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELITE CARGO SOLUTIONS LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Linuted L	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.24000029700	were filed on <u>01/16/2024</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and comain the words "Limited Liabil	ny Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	1431 Sunpson Rd., #1047	
Principal office address MUST BE A STREET ADDRESS)	Kissimmee, FL 34744	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:		the name of the
Name Danistarad Office Address	,	LE 25
New Registered Office Address.	Enter Florida street address , Florida	2 0 56 :
	City	EZp.Co.to

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act m 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>	Name	<u>Address</u>	Type of Action
			☐ Remove
			Change
			☐ Remove
		-	Change
			□ Add
			□ Remove
			□ Change
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an effect ote: Ti	date, if other than the date of filing:
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of Oth day after the record is filed.
ated	;25/2024
	/S/ Arthur Talley
	Signature of a member or authorized representative of a member