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S. PRATHER

COVER LETTER

TO:	Registration S Division of Co					
SUBJE	CT.	SERGIO'S TRANSPORT	SERVICES LLC			
SOBJE	C1	Name of Lim	ited Liability Company			
The enc	losed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please n	eturn all corresp	ondence concerning this matter	to the following:			
		SERGIO J. LOPE	Z LOPEZ			
			Name of Person			
		SERGIO'S TRAN	ISPORT SERVICES LLC			
			Firm/Company			
		5600 NW 6 ST, A	PT 6			
			Address	· · · · · · · · · · · · · · · · · · ·		
	MIAMI, FL 33126					
		SELLYLOPEZ21@	City/State and Zip Code			
		E-mail address; (to be used for future annual report not	ification)		
For furt	her information	concerning this matter, please c	all:			
SE	RGIO J. LOP	EZ LOPEZ	at (_786) 779-8°	···		
	Name	of Person	Area Code Daytin	ne Telephone Number		
Enclose	d is a check for	the following amount:				
\$2.5	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Addre		<u>Street Address:</u> Registration Se	ection		
	Division of 0	Corporations	Division of Cor	rporations		
	P.O. Box 63 Tallahassee,		The Centre of 3	Fallahassee be Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

SERGIOS TRANSPORT SERVICE	ES LLC
(Name of the Limited Liability Compa (A Florida Limited)	
The Articles of Organization for this Limited Liability Company Florida document number	(.)
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
PRIORITY BARBERSHOP LLC.	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	610 RICHMOND AVE N LEHIGH ACRES, FL 33972
Enter new mailing address, if applicable:	610 RICHMOND AVE N LEHIGH ACRES, FL 33972
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zin 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.

Zip Code

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	Address	Type of Action
MGR	YEIDISBER VALDIVIA MARTINEZ	610 RICHMOND AVE N LEHIGH ACRES I 33972	FL □Add
			□Remove
			Change
			□Adđ
			□Remove
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	02/01/2025	
fective date, if other than the date must be	e specific and cannot be prior to date of filing or more than 90	(optional) 0 days after filing.) Pursuant to 605.02
	k does not meet the applicable statutory filing requires	
ecord specifies a delayed effective of	late, but not an effective time, at 12:01 a.m. on the ear	rlier of: (b) The 90th day after th
is filed.		
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