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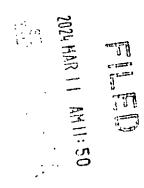
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: 507	TTansport of Limi	LLC	
	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subs	mitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
	omar Ai	lmeida Palomin	0
	-	Name of Person	
		Firm/Company	
	519 SW 7	th pl	
	Cape Coia	FL 33 99/ City/State and Zip Code	
	Services v+ (E-mail address: (t	@ yahoo · com	ication)
For further information c	oncerning this matter, please ca	ill:	
Omar Alm	neida Palomini	0 at (<u>94)</u> <u>268</u> Area Code Dayrime	- 4403
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he 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 Fec. 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**

SUT Transport	446
SUT Transport (Name of the Limited Liability Comp (A Florida Limited)	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L2400007745/</u> .	y were filed on <u>02/13/24</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
A. If amending name, enter the new name of the limited lial SVT Services LLC The new name must be distinguishable and contain the words "Limited Liab Enter new principal offices address, if applicable:	
The new name must be distinguishable and contain the words "Limited Liab	ility 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)	
	العداد المسلم
Enter new mailing address, if applicable:	: 00
(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:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida City Zin Code
No. Desired and American Company of the contract Desired American	
New Registered Agent's Signature, if changing Registered Agent	I and the second of the second

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>	Name	Address	Type of Action
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			□Remove
			UChange
		 	
			DChange
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			□Remove
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ectiv	e date, if other than the date of filing:
n effec	tive 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 605.020
	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it's effective date on the Department of State's records.
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
he 9	Oth day after the record is filed.
	22/25
ted _	03/05. 2024.
	$\mathcal{M}_{\mathcal{A}}$
	Signature of a member or authorized representative of a member
	Omar Almeida Yalomino