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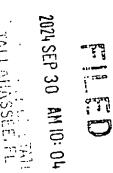
(Re	questor's Name)	
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☐ PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO:

Registration Section.

Division of C	orporations		•	
	ANSPORT LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	KEMUEL RUIZ MORAL	ES		
		Name of Person	<u></u>	-
		Firm/Company		-
	1352 BOULDER DR			2024
		Address		SEP
	KISSIMMEE, FL 34744			2024 SEP 30 AH 10: 04
		City/State and Zip Code		SC 至
	prvtransport.fl@gmail.com F-mail.address: (to be used for future annual report noti	fication)	
For further information	concerning this matter, please c	·	,	, +
KEMUEL RUIZ MO	RALES	407 7298736		
Name	of Person		e Telephone Number	•
Enclosed is a check for	the following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
Mailing Addi Registration Division of P.O. Box 6. Tallahassee	Section Corporations 327	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations `allahassee e Street, Suite 8	10

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	naonity Company)	
The Articles of Organization for this Limited Liability Company	were filed on 02/28/2024	and assigned
Florida document number L24000103783		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
-		
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	e abbreviation "L.1,.C."
Enter new principal offices address, if applicable:	3956 TOWN CENTER BLVD #257	
Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32837	202
		SE TO
		3 (Table 2)
Inter new mailing address, if applicable:	3956 TOWN CENTER BLVD #257	The state of the s
Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FL 32837	
		· •
) If amounting the registered agent and/our interest of 60 or	iddress on our records, enter the n	ame of the new regis

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

New Registered Office Address:

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.

City

Enter Florida street address

_. Florida ____

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
AMBR	KEMUEL RUIZ MORALES	1352 BOULDER DR	■Add
		KISSIMMEE, FL 34744	□Remove
			□Change
			□Add
			Remove 2024 Changes DAdd Table DRemove
			DANG STEEL OF THE
			□Change
			□ Remove
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				<u></u> .				
E eco	ctive date, if other than	the date of filin	09/01/2024		(
lf an e	effective date is listed, the date	must be specific and	d cannot be prior t	o date of filing or m	ore than 90 days aft	t ional) er filing.) Pursu	ant to 605.02	207 (
	If the date inserted in this ment's effective date on the			ble statutory filin	g requirements, th	nis date will n	ot be listed	as t
e reco	ord specifies a delayed effe filed.	ctive date, but not	t an effective tin	ne, at 12:01 a.m.	on the earlier of: ((h) The 90th	day after th	he
Dated	d Geptember	20	. 2024					
			·	\rightarrow				

Typed or printed name of signee