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To:	Division of Co Fax Number	orporations : (850)617-6383	JUL 1
From:	Account Name Account Number	: CUBATAX & TRAVEL INC -: 120180000100	ますの
	Phone Fax Number	: (813)493-0199 : (813)354-2432	₹. <del>.</del>

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

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# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GOLD DIAMOND TRANSPORT LLC

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Help

K. SALY
JUL 1 2 2024

From: KETYS RAMIREZ

# COVER LETTER.

TO:	Registra Division	ation Sect v of Corp	tion Orations		
SUBJE	GC	LD DIAN	MOND TRANSPORT LLC		
.,,,,,,,,	OI		Name of Li	nited Liability Company	
The enc.	losed An	icles of A.	mendment and fee(s) are su	bmitted for filing	
			dence concerning this matte		
			Ketys Ramirez		
				Name of Person	······
				Firm/Company	
			7211 N Dale Mabry HWY	STE 200	
				Address	
			TAMPA, FL 33614		
				City/State and Zip Code	
			E-mail address:	to be used for future annual report no	tification)
For furth	er inform	ation con	cerning this matter, please o	all:	
Ketys Ra	amirez			813 493-0199	
Name of Person		Atcu Cotle Daytii	ne Telephene Number		
Enclosed	is a chec	k for the f	ollowing amount:		
■ \$25.0	00 Filing	Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is erclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)
]   	Divisior P.O. Bo	tion Sec of Con	porations	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Fallahassee De Street, Suite 810

#### To:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



GOLD DIAMOND TRANSPORT LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 04/18/2024 \_\_\_\_ and assigned Florida document number L24000183965 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Later Florida street address

## 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.

If Changing Registered Agent, Signature of New Registered Agent

Τo

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

Title	<u>Name</u>	Address	Type of Action
Al'	Jorge E Aguilar Morales	7001 N HALE AVE	
		TAMPA, FL 33614	⊟Remove
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From: KETYS RAMIREZ

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