## L24000186115

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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## . . . . . . . . . COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: 6	G Apex Tro	ansports LLC nited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspor	dence concerning this matter	to the following:	
	Ramón (	Name of Person	<del></del>
	<u>G6 F</u>	Pex Transports Firm/Company	· LLC
	2718 Luca	S Lakes Lave	
	Kissimm	nee, Sty 3474	44
	Apex trans	City/State and Zip Code  Sports F/Q Gma  To be used for future annual report notifi	CC. COM fication)
For further information co	ncerning this matter, please ca		
Ramón Ga	lan	at( <u>917)_603</u> .	2404
Name of	Person	Area Code Daytimo	: 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)	☐ \$60.00 Filing Fee, 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

GG Apex	Transports LLC
( <u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liah	while the company were filed on $\frac{4/19/24}{24}$ and assigned
Florida document number <u>LZ400018(</u>	<u>e115</u> .
This amendment is submitted to amend the follow	ring:
A. If amending name, enter the new name of the	he limited liability company here:
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:
(Principal office address MUST BE A STREET)	ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>DX)</u>
B. If amending the registered agent and/or reginger and/or the new registered office address leadings.	istered office address on our records, <u>enter the name of the new registered</u> here:
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	
	Enter Florida strect address
	, Florida
	City Zip 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.

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
AMBR	Jose Christian	2718 Lucas lakes La Kissimme FL, 34744	E <del>Add</del>
			Remove
			□Change
			□Add
			□Remove
			🗆 Change
	<del></del>		□ Add
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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
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-	
Effect	ive date, if other than the date of filing: (optional)
Note:	ective 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 605.0207 (3 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
the recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	5/22/00 . 20thy.
	Signature of a member of authorized representative of a member
	Typed or printed name of signee