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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : I20170000055 Phone

: (954)842-2931

Fax Number

: (954)842-2936

**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 RELIABLE TRANSPORT.LIMO LLC

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COVER LETTER

_	on of Corporations	
RE	ELIABLE TRANSPORT.LIMO LL	.C
5005ET	Name of	Limited Liability Company
The enclosed Ar	rticles of Amendment and fee(s) are	submitted for filing.
	correspondence concerning this ma	•
	SHABABO, SAMMY	
		Name of Person
	RELIABLE TRANSPO	ORT.LIMO LLC
		Firm'Company
	2539 SHERMAN ST	
		Address
	HÖLLYWOOD, FL 33	8020
		City/State and Zip Code
	samınyshababo@gmail. E-mail addres	com ss: (to be used for future annual report notification)
For further inform	nation concerning this matter, pleas	•
SHABABO, SA	MMY	954 588-3267
	Name of Person	at () Area Code Daytime Telephone Number
Enclosed is a chee	ck for the following amount:	
■ \$25.00 Filing	; Fee	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registra Divisio P.O. Bo	Address: ation Section on of Corporations ox 6327 ussee, 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

RELIABLE TRANSPORTALIMO LLC

(Name of the Limite	d Linkille. Company of the	
, <u>seine of the Lange</u>	d Liability Company as it now appears on our records A Florida Limited Liability Company)	<u>.</u> }
The Articles of Organization for this Limited Lia Florida document number L24000193053	ability Company were filed on 04/24/2024	and assigned
This amendment is submitted to amend the foilognation	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	Cahhanes	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B.		
		202
B. If amending the registered agent and/or regagent and/or the new registered office address	gistered office address on our records, <u>euter th</u> <u>here</u> :	ne name of the new registere
Name of New Registered Agent:		ा छ
New Registered Office Address:		PHIZ: L
	Enter Florida street address	6
	, Flori	idaZip Code
	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	CHITOROAGA, RUSLANA	2539 SHERMAN ST	= _Add
	;	HOLLYWOOD, FL 33020	_
			□Change
			□Add
			□Remove
			□Change
			□Remove
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ffective date, if other than t an effective date is listed, the date in lote: If the date inserted in this	tust be specific and cann	or he prior to date a	filing or more than 9	(optional)) days after filing.) Pursuan	: to 605.0207
iote: If the date inserted in this ocument's effective date on the	Department of State's	ne appreante stat s records.	ntory tiling require	nents, this date will not	be listed as (
	live date, but not an ef	ffective time, at 1	2:01 s.m. on the ear	lier of: (b) The 90th di	sy after the
record specifies a delayed effect lis filed.					
record specifies a delayed effect is filed. 1 is filed. 1 ated		24			
is ince.	Ruslana Signature of a member		j a		

Filing Fee: \$25.00