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COVER LETTER

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Tallahassee, FL 32314

TO: Registration Se Division of Cor			
SUBJECT: Amendmer	nt name		
-	Name of Lim	nted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Juan Javier Sosa Izquierdo	1	
		Name of Person	
	FirmCompany		
	101 Hibiseus Ln	Address	
	Naples, Florida 34114	, KAILCO	
		City/State and Zip Code	
	hopeconnectiontransport@g E-mail address: (gmail.com to be used for future annual report noti	fication)
For further information c	oncerning this matter, please co	all:	
Juan Javier Sosa		at (<u>832</u>) <u>7584717</u>	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne 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		<u>Street Address:</u> Registration Se	ction
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of T	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Hope Conection Transport LLC	2024 SEP 16 PM 3: 39		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	<mark>iny as it now appears on our re</mark> Liability Company)	cords.)	Fair.
The Articles of Organization for this Limited Liability Company	were filed on April 29, 202	4	and assigned
Florida document number 1.24000199306			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
Hope Connection Transport LLC			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company." the designation "	T.E.C" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:	101 Hibiscus LN		
(Principal office address MUST BE A STREET ADDRESS)	Naples, Florida 34114		
Enter new mailing address, if applicable:			
(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>er</u>	iter the name o	the new registe
igene and me new registered writer address nere.			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street ac	ldress	
		. Florida	Zip 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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Owner	Juan Javier Sosa Izquierdo	101 Hibiscus Ln. Naples Florida, 34114	= Add
			□Remove
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			i⊒Add
			□Remove
			□Change
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			□Change
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Signature of a member or authorized representative of a member

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