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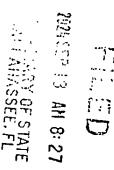
(Requestor's Name)
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COVER LETTER

TO: Registration Sec Division of Corp			
	SPORTATION LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	-	
	Vincent A Gerardo		
	· · ·	Name of Person	
		Firm/Company	<u> </u>
	62 Woodhaven Dr.		
		Address	
	Wayne, NJ 07470		
		City/State and Zip Code	
	zigtransportation@gmail.co	om to be used for future annual repo	rt notification)
For further information co	oncerning this matter, please c	•	,
Vincent A Gerardo		973 706-38	54
Name of	Person	Area Code E	Paytime Telephone Number
Enclosed is a check for th	e 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	<u>s:</u>	Street Addre	<u>:ss:</u>

Registration Section
Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 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

ZIG TRANSPORTATION LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our re ted Liability Company)	<u>scords.</u>)
The Articles of Organization for this Limited Liability Comp.	any were filed on May 09, 2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
he new name must be distinguishable and contain the words "Limited L	iability Company," the designation	'LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		A III SSE
		E. F. 8:
		27 \TE
3. If amending the registered agent and/or registered offigent and/or the new registered office address here:	ice address on our records, <u>e</u>	nter the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	ddress
		, 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 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>	<u>Address</u>	Type of Action
MGR	Mohammed Y Ibntalal	11 Woodlot Rd	
		Bloomingdale, NJ 07403	Remove
			■ Change
MGR	Eric Zilleruelo	9771 NW 24th Pl	□ Add
		Sunrise, FL 33322	□Remove
			⊞ Change
MGR	Vincent A Gerardo	62 Woodhaven Dr.	□Add
		Wayne, NJ 07470	□Remove
			□Add
			□Remove
			□Change
	· · ·		☐ Add
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	. 14	27
fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing or mo	(optional) ore than 90 days after filing.	.) Pursuant to 605.02
ote: If the date inserted in this block does not meet the applicable statutory filing cument's effective date on the Department of State's records.		
cument 3 creedite date on the Department of State 3 records.		
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. o	on the earlier of: (b) Th	ne 90th day after ti
is filed.		
Santa Lac 9 amay		
NAADO		
Signature of a member or authorized representative		

Filing Fee: \$25.00