L24000437150

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10/29/24--31808--607 **25.60

LLC Amend

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2024 OCT 29 PH 12 37

A. RAMSEY NOV 19 2074

COVER LETTER

	tegistration Sec Division of Cor					
eun iez	JJ & B FRE	IGHT LLC				
SUBJEC'	Name of Limited Liability Company					
		Amendment and fec(s) are sub				
Please reti	irn all correspo	ndence concerning this matter	to the following:			
		Angela Santos				
			Name of Person			
			Firm/Company			
		7500 NW 52ND ST SUITE 100				
		Address				
		MIAMI FL 33166				
		City/State and Zip Code				
		E-mail address: (to be used for future annual report notifi	cation)		
For furthe	r information co	oncerning this matter, please ca	all:			
Angela St	intos		305 5998287			
	Name of	Person		Telephone Number		
Enclosed	s a check for th	e following amount:				
■ \$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Ŋ	lail <u>i</u> ng <u>Addres</u>	s:	Street Address:			

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 ORGANIZATION OF POR OCT 29 PH 12 37 A Florida Limited Liability Company as it now appears to the company as it now app

JJ & B FREIGHT 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 Compan	y were filed on 10/14/	2024	and assigned
Florida document number 1.24000437150			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here	:	
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the desig	mation "LLC" or the at	breviation "L.L.C."
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 agent and/or the new registered office address here: Name of New Registered Agent:	address on our reco	rds, <u>enter the nam</u>	e of the new registered
New Registered Office Address:			
	Enter Florida	street address	
		, Florida	Zip Code
	•		Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of my s provided for in Cha	v duties, and I am j apter 605, F.S. Or,	familiar with and if this document is
If Ch	anging Registered Agent	, Signature of New Re	gistered 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>	<u>Name</u>	Address	Type of Action
AMBR	BLANCA N VEGA	11940 SW 191 TER MIAMI FL 33177	■Add
			Remove
			Change
			□ Add
			Remove
			□ Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			□ Change
			DAdd
			□Remove
			□ Changa

). If amo	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ive date, if other than the date of filing:
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	OCTOBER 21st 2024
	Signature of a member or authorized representative of a member
	BLANCA N VEGA
	Typed or printed name of signee

•

Filing Fee: \$25.00