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(Re	equestor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer.	

Office Use Only



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COVER LETTER

TO:	Registration Se Division of Cor					
SUBJE	CT: M&Y	UNION	TEANSPORT	ATTON LLC		
	<u> </u>		ame of Limited Liabilit			_
The enc	losed Articles of	Amendment and fee	(s) are submitted for	filing.		
			his matter to the follo	_		
		YANIC	JUSTIN	OUAL		
				e of Person		_
			_	/Company		_
		853 (XX I BNOR	L CIR	- <u> </u>	_
		CRIT	ST OGUL	32825		
			<u> </u>	and Zip Code	_	
		my. Unio	206 @ am	•	otification)	-
For furth	ner information co	oncerning this matter		,	,	
<u> </u>	nd Jus	storano	at (407 873	6939	
	Name of	Terson	<i>:</i>	Vrea Code — Daytii	me Telephone Numb	er
Enclosed	I is a check for th	e following amount:				
1 \$25.	00 Filing Fee	S30.00 Filing I Certificate of	Status Cert	00 Filing Fee & ified Copy tional copy is enclosed)	Certifie	Filing Fee, cate of Status & ed Copy al copy is enclosed
	Mailing Address	<u>:</u>		Street Address:		292
	Registration S Division of Co	ection		Registration So Division of Co		924 NOV 19
	P.O. Box 6327 Tallahassee, F	7		The Centre of	Tallahassee	
	rananassee, f	1. 323[4		2415 N. Monro Tallahassee, Fl	be Street, Suite L 32303	AH III

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M&Y UNION TEANSPORTATION LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

Florida document number	bility Company were filed on <u>10 02 5</u> 8500 .	2024 and assigned	
	ent is submitted to amend the following: In a name, enter the new name of the limited liability company here: Sust be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." incipal offices address, if applicable: See address MUST BE A STREET ADDRESS) Suiling address, if applicable: Sees MAY BE A POST OFFICE BOX) Sees MAY BE A POST OFFICE BOX Sees MAY BE a post office address here: See of New Registered Agent: YANIC JUSTINIANO		
	document number		
The new name must be distinguishable and contain the wo	nitted to amend the following: enter the new name of the limited liability company here: fices address, if applicable: s MUST BE A STREET ADDRESS) ress, if applicable: BE A POST OFFICE BOX) fistered agent and/or registered office address on our records, enter the name of the new registered egistered office address here: ADIL JUSTINIANO		
Enter new principal offices address, if applica	ble:	_	
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	OX)	<u> </u>	
B. If amending the registered agent and/or regagent and/or the new registered office address	<u>here</u> :	r the name of the new registered	
Name of New Registered Agent:	YANIC JUSTINIANO		
New Registered Office Address:	853 OAK MANOR CIR		
	Enter Florida street address		
	0 01 1100		
	ORLANDO, F	lorida <u>32825</u>	
	ORLANDO , F	lorida <u>32825</u> 3 Zip Code	

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
MGR	Communital Mary	853 OAK MANDE LIE	T Add
		DELANDO FL 32825	□Remove
			□ Change
			🗆 Add
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			□Change

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ective date, if other than the date of filing: No. 15.2024 (optional offective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. If the date inserted in this block does not meet the applicable statutory filing requirements, this date tument's effective date on the Department of State's records.	ng.) Pursuant to 605.	020° d as
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) is filed.	The 90th day after	the
ed NOU. 15 . 2024 A	2024 HOV 19 855 1 1/1/25	
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