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DEC 07 S. PRATHER

COVER LETTER

): Registration Section Division of Corporations	
JBJECT: A&B Cargo Por L Name of Limited	Liability Company
ne enclosed Articles of Amendment and fee(s) are submit	ted for filing.
ease return all correspondence concerning this matter to t	he following:
Glain R.	Bonilla Pavon Name of Person
A&B Cargo	Pro IIC. Firm/Company
22212 SW	128th Path.
Homestead	FL 33033.
abcarao proca E-mail adiress: (to b	e used for future annual report notification)
or further information concerning this matter, please call:	
Aliuska Pirez Name of Person	at (786) 259-5488. Area Code Daytime Telephone Number
inclosed is a check for the following amount:	
☑ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, 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

100000	110	,
Name of the Limited Liability Cor	npany as it now appears on our records.)	
(A Florida Limit	mpany as it now appears on our records.) ted Liability Company)	25 89
he Articles of Organization for this Limited Liability Compa	any were filed on	and assigned
lorida document number <u>L 24000456547</u>	ary were fined on	und ussigned
londa document number L 3 1000 150 5 T		
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited l	iability company here:	
he new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or t	he abbreviation "L.L.C."
nter new principal offices address, if applicable:		
<u> Principal office address MUST BE A STREET ADDRESS</u>	<u> </u>	
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered offi	ce address on our records, enter the	name of the new regis
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
ivew registered Office Address:	Enter Florida street address	
	_	
	, Florida City	Zip Code
w Registered Agent's Signature, if changing Registered Age	•	•
	_	
hereby accept the appointment as registered agent and a		
rovisions of all statutes relative to the proper and compl ccept the obligations of my position as registered agent t		•
eing filed to merely reflect a change in the registered off		

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

GR = Manager MBR = Authorized Member

<u>:tle</u>	Name	Address	Type of Action
162	aliuska Perez Blanco	28212 SW 128th Path, Homestead	<i>F(33</i> 0 □ Add
			Remove
			□ Change
19R	Alain R. Bonilla Pavon	28212 Sev 128th Path Homestog F	133033 (4Add
			□ Remove
			□ Change
			🗆 Add
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			□ Change
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			□ Remove

tive date, if other than the date of filing: (optional) (fictive date, if other than the date of filing: (physical date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0/20 to the first of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ment's effective date on the Department of State's records. Ord 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 filed. I November 2 ncl , 2024. Signature of a member or sufficient for purposentative of a member and the filed.						
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Aliuska Rivez Blanco		, <u>2024</u> .				2024 1:(
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