

LDL0000015866

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

LDL- 15866

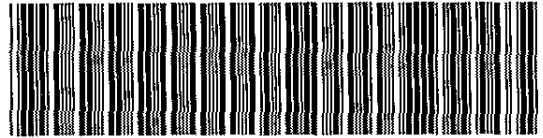
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

2/27 amend

Office Use Only



500066690355

02/27/06--01033--001 **25.00

FILED
06 FEB 27 AM 11:22
TALLAHASSEE FLORIDA

M. HODGES

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MIKA & R S TRUCKING, LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

RUBEN O. VOZZI

(Name of Person)

(Firm/Company)

2831 E SUNRISE LKS DR BG 12 APT 111

(Address)

SUNRISE, FL 33322

(City/State and Zip Code)

For further information concerning this matter, please call

RUBEN O VOZZI

(Name of Person)

at 954 578-4875

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount.

\$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$68.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/POST OFFICE ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

MIKA & R S TRUCKING, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 02/13/2006 and assigned document number L050C0015966

SECOND: This amendment is submitted to amend the following:

ADDING THE FOLLOWING:

NESTOR J. BENITEZ AS MANAGER
1816 SW 2ND PL
CAPE CORAL, FL 33991 US

DELETING THE FOLLOWING:

REINALDO GONZALES AS MANAGER
719 SE 9TH AVE
CAPE CORAL, FL 33990 US

Dated FEBRUARY 24, 2006



Signature of a member or authorized representative of a member

RUBEN O. VOZZI

Typed or printed name of signee

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 FEB 27 AM 11:22

FILED