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## **COVER LETTER**

то:	Registrati Division o				
		R FLAT	BED FREIGHT LLC		
SUBJEC	UI:		Name of Lim	ited Liability Company	<del></del>
The encl	losed Articl	les of A	mendment and fee(s) are sub	mitted for filing.	
Please re	eturn all co	rrespond	lence concerning this matter	to the following:	
			REINIER PEREZ		
				Name of Person	
			MGR		
				Firm/Company	
			305 SCHOOLSIDE DR		
				Address	
•	•		LEHIGH ACRES, FL 339	36	
				City/State and Zip Code	
			INFO@DIRECTSOLUTIO	NSER VICES.COM to be used for future annual report to	ortification)
For furth	ier informa	ition con	cerning this matter, please ca	·	antidation,
REINIE	R PEREZ			239 222-2016 at ()	
	N	lame of F	Person	Area Code Dayt	ime Telephone Number
Enclosed	d is a check	c for the	following amount:		
□ <b>\$</b> 25.	00 Filing F	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:

TO:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ted Liability Compa (A Florida Limited I	ny as it now appears Jiability Company)	on our records.)		· <del></del>	
iability Company	were filed on FLC	PRIDA		and assi	igned
owing:					
f the limited liab	ility company her	<u>e</u> :			
vords "Limited Liabil	ity Company," the des	ignation "LLC" or t	he abbrev	iation "L.l	L.C."
able:	503 W OREGON	RD			
T ADDRESS)	LEHIGH ACRES	5, FL 33936		200	
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ffice address her	<u>e</u> :	our records, <u>er</u>	iter the	name :	of the i
501 W CD ECIC	W DD		-		
503 W OREGO		la street address		. —.	
LEHIGH ACR			33936		
	Čity	Florid:	a <u></u>	Lip Code	_
	owing:  f the limited liab  words "Limited Liabile:  ET ADDRESS)  for registered of fice address here  REINIER PER  503 W OREGO	iability Company were filed on FLC owing:  f the limited liability company her words "Limited Liability Company," the des rable:  503 W OREGON LEHIGH ACRES  BOX)  /or registered office address on ffice address here:  REINIER PEREZ  503 W OREGON RD  Enter Florid LEHIGH ACRES	The limited liability company here:  Solution of the limited liability Company, the designation of LLC of the limited Liability Company, the designation of LLC of the limited Liability Company, the designation of LLC of the limited Liability Company, the designation of LLC of the limited Liability Company, the designation of LLC of the limited Liability Company, the designation of LLC of the limited Liability Company, the designation of LLC of the limited Liability Company, the designation of LLC of the limited Liability Company, the designation of LLC of the liability Company, the liability Company, the liability Company of LLC of the liability Company, the liability Company of LLC of the liability Company, the liability Company of LLC of the lability Compan	iability Company were filed on FLORIDA  owing:  f the limited liability company here:  Sords "Limited Liability Company," the designation "LLC" or the abbrev rable:  SOB WOREGON RD  LEHIGH ACRES, FL 33936  For registered office address on our records, enter the ffice address here:  REINIER PEREZ  503 W OREGON RD  Enter Florida street address  LEHIGH ACRES  LEHIGH ACRES  Florida 33936	and assignation were filed on FLORIDA and assignation and assignation and assignation and assignation and assignation and assignation are subject to the limited Liability Company, the designation are subject to the liability Company, the designation are subject to the liability Company, the designation are subject to the liability Company are subject to the l

## 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 Changing Registered Agent, Signature of New Registered 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	LIZET M CASTELLANOS-CRUZ	503 W OREGON RD	<b>∃</b> Add
		LEHIGH ACRES, FL 33936	
			Remove
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tive date, if other than the dat fective date is listed, the date must be s If the date inserted in this block on ment's effective date on the Depart	specific and cannot be prior to date of filing or modes not meet the applicable statutory filing	(optional)  ore than 90 days after filing.) Pursuant to 605.0 g requirements, this date will not be listed
cord specifies a delayed eflee 90th day after the record	fective date, but not an effective to is filed.	ime, at 12:01 a.m. on the earlier
10/30/2017	2:00 PM	
·		2917
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Sign	ature of a member or authorized representative	of a member

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