



2018-09-20 20:20:32 (GMT) 18132001059 From Trucking Permits And More LLC
Division of Corporations
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000275399 3))



H180002753993ABCB

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : TRUCKING PERMITS AND MORE LLC
Account Number : 120140000047
Phone : (813)774-4726
Fax Number : (813)877-2186

9/21/18 20:11:13

FILED

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
Y.E.L TRANSPORT LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

RECEIVED
SEP 20 2018

9/21/18 DS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Y. E. L. TRANSPORT LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LABRADOR, YOERLANDY

Name of Person

Y. E. L. TRANSPORT LLC

Firm/Company

5138 N MATANZA AVE

Address

TAMPA, FL 33614

City/State and Zip Code

labradoryoerlandy1205@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LABRADOR, YOERLANDY

Name of Person

813 ()

Area Code

4591161

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)

\$60.00 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SEP 20 11 13

SEP 20 11 13

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Y E L TRANSPORT 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 Company were filed on 04/22/2016 and assigned Florida document number L16000079122

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 4805 BONITA VISTA DR TAMPA, FL 33634 (Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: 4805 BONITA VISTA DR TAMPA, FL 33634 (Mailing address MAY BE A POST-OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: LABRADOR, HERIBERTO New Registered Office Address: 4805 SONITA VISTA DR TAMPA Florida 33634

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.

[Handwritten Signature] 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>	<u>Address</u>	<u>Type of Action</u>
MGR	LABRADOR, YOERLANDY	5138 N MATANZA AVE	<input type="checkbox"/> Add
		TAMPA, FL 33614	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
M	LABRADOR, YOERLANDY	5138 N MATANZA AAVE	<input type="checkbox"/> Add
		TAMPA, FL 33614	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LABRADOR, HERIBERTO	4805 BONITA VISTA DR	<input checked="" type="checkbox"/> Add
		TAMPA, FL 33634	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

