

L23000297510

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

From:  
Account Name : TRUCKING PERMITS AND MORE LLC  
Account Number : I20140000047  
Phone : (813)774-4726  
Fax Number : (813)877-2186

2023-09-22 PM 1:40

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

Email Address: \_\_\_\_\_

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2023 SEP 22 PM 2:43

DEPT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
EL POTRO HAULING LLC**

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

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: EL POTRO HAULING LLC**  
\_\_\_\_\_

Name of Limited Liability Company

The enclosed Article(s) of Amendment and feets) are submitted for filing

Please return all correspondence concerning this matter to the following:

FIGUEREDO TEJEDA, DARIEL  
\_\_\_\_\_

Name of Person

EL POTRO HAULING LLC  
\_\_\_\_\_

Firm Company

1725 GIBSONIA GALLOWAY RD LOT 52  
\_\_\_\_\_

Address

LAKELAND, FL 33810  
\_\_\_\_\_

City, State and Zip Code

figueredodariel02@gmail.com  
\_\_\_\_\_

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

For further information concerning this matter, please call:

FIGUEREDO TEJEDA, DARIEL	813	4366281	
Name of Person	Area Code	Daytime Telephone Number	

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

EL POTRO HAULING 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 06-20-2023 and assigned Florida document number 123000297510

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:

1725 GIBSONIA GALLOWAY RD LOT 52

(Principal office address MUST BE A STREET ADDRESS)

LAKELAND, FL 33810

Enter new mailing address, if applicable:

1725 GIBSONIA GALLOWAY RD LOT 52

(Mailing address MAY BE A POST OFFICE BOX)

LAKELAND, FL 33810

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:

New Registered Office Address:

1725 GIBSONIA GALLOWAY RD LOT 52

Enter Florida street address

LAKELAND

City

Florida 33810

Zip Code

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	FIGUEREDO TEJEDA, DARIEL	1725 GIBSONIA GALLOWAY RD LOT 52	<input type="checkbox"/> Add
		LAKELAND, FL 33810	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	LAGUNA BOURZAC, ALIZANDRA	3102 SAMPLE CT	<input type="checkbox"/> Add
		TAMPA, FL 33619	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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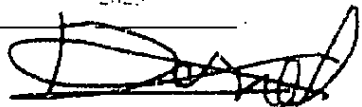
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective 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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (h) The 90th day after the record is filed.

Dated SEPTEMBER 22 2023



Signature of a member or authorized representative of a member

DARIEL FIGUEREDO TEJEDA

Typed or printed name of signee