## L13000000385

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THE END OF STATE AND ANASSEE, FLORIDA

C. LEWIS
JUN 2 5 2013
EXAMINER

## **COVER LETTER**

Wal	lden Transport LLC
SUBJECT: VV CI	Name of Limited Liability Company
The enclosed Articles	of Amendment and fee(s) are submitted for filing.
Please return all corre	espondence concerning this matter to the following:
	Tonjua Walden
	Name of Person
	Walden Transport LLC
	Firm/Company
	5115 N 20th St
	Address
	Tampa,FL 33610
	City/State and Zip Code iwalden62@yahoo.com
	E-mail address: (to be used for future annual report notification)
For further informatio	on concerning this matter, please call:
Tonjua W	alden <sub>at</sub> _813_239-9607

\$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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

13 JUN 24 PH 4 22

Walden Transport LLC

SECRETARY OF STATE

(Name of the Limited Liability Company as it now appears on dubt described SEE, FLORIDA

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability	Company were filed on 01/02/2013	and assigned
Florida document number L1300000385	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the w"L.L.C."	words "Limited Liability Company," the desig	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable:		
Enter new maning address, it approache: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		enter the name of the new
Name of New Registered Agent:	V	
New Registered Office Address:	<del></del>	
	Enter Florida street address	
		orida
•	City	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 608, 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 amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member		13 JUN 24 PH 4: 22	
<u>Title</u>	Name		Type of Action
MGR	Irwin Walden	SECRETARY OF STATE 5115 NT 20th SET FLORIDA	Add
		Tampa, FL 33610	Remove
			Add Remove
			Add
	-		Add Remove
<del></del>			Add Remove
	·		Add
			Remove

	mation, enter change(s) here: (Attach a	
Adding Irwin V	n Walden as an authorize user	
		13 JUN 24 PM 4: 2
		SECRETARY OF STATE TALLAHASSEE, FLORIDA
Dated June 13	2013	
Donyua Wa	elden	
Tonjua Walde	organization of a mornoof of authorized repress	entative of a member
Torijua vvalde	Typed or printed name of si	gnee
	Page 3 of 3	

Page 3 of 3

Filing Fee: \$25.00