# 0600087083 (Requestor's Name) (Address) 800131477178

06/23/08--01023--031 \*\*55.00

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| (Add                      | ress)            |             |
|---------------------------|------------------|-------------|
|                           |                  |             |
| (City                     | /State/Zip/Phon  | e #)        |
| PICK-UP                   | WAIT             | MAIL        |
| (Bus                      | iness Entity Nar | ne)         |
|                           | ·                |             |
| (Doc                      | ument Number)    |             |
|                           |                  |             |
| Certified Copies          | Certificates     | s of Status |
|                           |                  |             |
| Special Instructions to F | iling Officer    |             |
|                           |                  |             |
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|                           |                  |             |

Office Use Only

# **COVER LETTER**

| SUBJECT: | R.A.                                | Fill | + Trucking, L.L.C. |  |
|----------|-------------------------------------|------|--------------------|--|
|          | (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:



For further information concerning this matter, please call:

at (863 493  $\cap$ (Area Code & Daytime Telephone Number) rson)

Enclosed is a check for the following amount:

\$25.00 Filing Fee Ö,

TO:

**Registration Section Division of Corporations** 

> □\$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<br>TO<br>ARTICLES OF ORGANIZATION<br>OF  |
|--|
| R.A. Fill "Trucking L.L.C.<br>(Name of the Limited Liability Company as it now appears on our records.)<br>(A Florida Limited Liability Company)                   |
| The Articles of Organization for this Limited Liability Company were filed on <u>September 05, 2010</u> and assigned Florida document number <u>L06000087083</u> . |
| 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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

| Enter new principal offices address, if applicable: | THE L   |
|---|---------|
| (Principal office address MUST BE A STREET ADDRESS) | <u></u> |
|   |         |
|   | Ho H    |
| Enter new mailing address, if applicable:           |         |
| (Mailing address MAY BE A POST OFFICE BOX)          |         |

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

| Name of New Registered Agent:  | Alice Dedge    |                             |
|--------------------------------|----------------|-----------------------------|
| New Registered Office Address: | 115 South Desi |                             |
|                                | (En            | ter Florida street address) |
|                                | Arcadia        | , Florida <u>34260</u>      |
|                                | (City)         | (Zip <sup>'</sup> 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 Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

| Title               | Name                                     | Address  | Type of Action   |  |
|---------------------|--|--|--|--|
| ᠓ᠿᢧᡌᡢ               | Adrian Guerra                            | 4635 N.W. Highbord Ave.<br>Arcodia, FL-34261,                            | Add<br>Remove  |  |
| MC-RM               | Kelen Stayer                             | 1358 S.E. Hwy 3/<br>Accadia, FL. 34266                                   | Add<br>Remove  |  |
| <u> Mr.Rm</u>       | Stephanie Steyer                         | 1153 S.W. Skates A.<br>Arcadia, FL 34266                                 | Add<br>Remove  |  |
| <u></u>             |  |  | Add<br>Remove 8  |  |
| <u> </u>            |  | ·  | Add<br>Remove 08 JUN 23 AM 11: 4 23<br>Remove OF STATE<br>Add State OF STATE<br>Add State OF STATE<br>Remove OF STATE<br>Add State OF STATE<br>Remove OF STATE |  |
|                     |  |  | Add BRemov   |  |
| D. If amendin       | ng any other information, enter change(s | s) here: (Attach additional sheets, if necessary.)                       |  |  |
|                     |  | · · · · · · · · · · · · · · · · · · ·                                    | <u> </u>   |  |
|                     |  |  | _  |  |
| Dated <u>Jun</u>    | alice a                                  | Jeder  |  |  |
| _                   | Alice De                                 | authorized representative of a member<br>dg-e<br>priviled name of signee |  |  |
| Page 2 of 2         |  |  |  |  |
| Filing Fee: \$25.00 |  |  |  |  |