08000007321

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	:y/State/Zip/Phone	e #)		
		_		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	cument Number)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
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JIVISION OF CORPORATIONS

J. BRYAN

NOV 1 9 2008

EXAMINER

COVER LETTER

10:	Division of Corp				
SUBJEC	CT:	Stormy Tran	sportation, LLC		Ð
			ited Liability Company)		_
The encl	osed Articles of A	mendment and fee(s) are sub	omitted for filing.		
Please re	eturn all correspon	dence concerning this matter	to the following:		
		TI	haddeus C. Preston		
			(Name of Person)		
		S	tormy Transportation, LLC		
			(Firm/Company)		<u>ت</u> چ
			4400 Alamada D		8 150
			1409 Alameda Drive South (Address)		OB NOV 18 AM 11: 45
					9 97
			Lakeland, FL 33805 (City/State and Zip Code)		Wordsonations
			(Only Diale and Exp Code)		
For furth	er information co	ncerning this matter, please c	all:		en 7
Thac	ldeus C. Prestor		at (_863) 838-3951		
	(Name of	Person)	(Area Code & Daytime Telephone Number)		
Enclosed	is a check for the	following amount:			
\$25.0	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 Sta Certified Copy (additional copy	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tion Section of Corporations 6 6327	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle	

-ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Stormy Transp			
(<u>Name of the Limited Lia</u> (A Flo	bility Company	as it now appear	rs on our records.)	
(/11/6	rida Ellintea Ela	omey company)		2 3 3 4
The Articles of Organization for this Limited Liabil	lity Company w	ere filed onJa	anuary 22, 2008	and assigned
Florida document numberL08000007321		937		
				9 0 4 1
This amendment is submitted to amend the following	ng:			D SA
				MIII: FE
A. If amending name, enter the new name of the limited liability company here:				ひ ま
The new name must be distinguishable and end with th "L.L.C."	e words "Limited	1 Liability Compa	ny," the designation "LL	.C" or the abbreviation
Enter new principal offices address, if applicable:		1409 Alameda Drive South		
(Principal office address MUST BE A STREET A	DDRESS)	Lakeland, FL 33805		
				·
Enter new mailing address, if applicable:		1409 Ala	meda Drive South	
(Mailing address MAY BE A POST OFFICE BOX)		Lakeland, FL 33805		
B. If amending the registered agent and/or projections of the control of the cont	registered offic	e address on o	our records, enter th	e name of the new
registered agent and/or the new registered office	address nere:			
	Torny Son	ncion		
Name of New Registered Agent:	Terry Session			
New Registered Office Address:	906 West	5th Street		
		(Ei	nter Florida street addr	ress)
	Lakeland		, Florida_3380	05
		(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 oddress, I hereby confirm that the limited liability company has been notified in writing of this change.

(If Changing Bygistered Agent, Signature of New Registered Agent)

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

MGR = Manager

MGRM = Managing Member **Title** Name | Type of Action **Address** Thaddeus C. Preston Mgr 1409 Alameda Drive South **₽** Add Lakeland, FL 33805 Remove _ Add Remove 🗂 Add Remove ☐ Add ☐ Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated November 17, Signature of a member or authorized representative of a member Thaddeus C. Preston Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00