

08/20/09 08:44

Division of Corporations

AY-MIA

Pg 002

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**L08000059937**

Florida Department of State  
Division of Corporations  
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To:

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

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Account Name : ADORNO & YOSS, PA  
Account Number : 072100000120  
Phone : (305) 460-1000  
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09 AUG 20 AM 8:01  
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**

**C&C FLORIDA TRUCKING, LLC**

Certificate of Status	1
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**J. BRYAN**

AUG 21 2009

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**EXAMINER**

**RECEIVED**

09 AUG 20 AM 10:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**C&C FLORIDA TRUCKING, 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 JUNE 18, 2008 and assigned Florida document number L08000059937.

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 "LLC."

Enter new principal offices address, if applicable:

**(Principal office address MUST BE A STREET ADDRESS)**

7315 NW 43rd STREET

MIAMI, FLORIDA 33166

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, enter the name of the new registered agent and/or the new registered office address here:**

**Name of New Registered Agent:**

CORPORATE CREATIONS NETWORK INC.

**New Registered Office Address:**

11380 PROSPERITY FARMS ROAD, #221E

*Enter Florida street address*

PALM BEACH GARDENS

Florida

33410

*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.*

Valerie Hawk

*If Changing Registered Agent, Signature of New Registered Agent*

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Valerie Hawk, Special Secretary

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- 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	

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

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Dated AUGUST 17, 2009.



Signature of a member or authorized representative of a member

KARYL ARGAMASILLA

Typed or printed name of signer

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