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DIVISION OF CORPORATIONS

OB SEP -3 AN II: 49

J. BRYAN

SEP - 4 2008

EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp					
SUBJECT: CONTR	ERAS TRUCKING	LLC			
		ited Liability Company)	_		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	Q.		
Please return all correspon	ndence concerning this matter	to the following:	OS S		
			KP KEL		
	RENE CONTRERAS				
		(Name of Person)	OB SEP -3 AMII: 49		
(Firm/Company)					
14852 SWEET CHARLIE CIRCLE					
		(Address)			
	WIMAUMA, FL 33598-61	38			
		(City/State and Zip Code)	, , , , , , , , , , , , , , , , , , , 		
For further information co	oncerning this matter, please c	all:			
DAVID CRUZ		at (813) 948-0648			
(Name o	(Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for th	e following amount:				
\$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)		
Registra Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle		

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

CONTRERAS TRUCKING LLC

(Name of the Limited)	Florida Limited L	iy as it now appears on our iability Company)	records.)		
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on JULY 29, 2008 and assigned Florida document number L08000072759					
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
GVC TRANSPORT LLC					
The new name must be distinguishable and end with "L.L.C."	n the words "Limi	ted Liability Company," the	designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:		14852 SWEET CHARLIE CIRCLE			
(Principal office address MUST BE A STREET ADDRESS)		WIMAUMA, FL 33598-6138			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		14852 SWEET CHARLIE CIRCLE WIMAUMA, FL 33598-6138			
B. If amending the registered agent and/or registered agent and/or the new registered off			ords, <u>enter the name of the new</u>		
Name of New Registered Agent:		T CHARLIE CIRCLE			
New Registered Office Address:	rida street address)				
		(Enter Florida street address)			
	WIMAUMA	(City)	_, Florida 33598-6138 (Zip Code)		
		(Ony)	(Lip Couc)		

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, 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 Title <u>Name</u> **Address Type of Action** MGRM RENE CONTRERAS JR 14852 SWEET CHARLIE CIRCLE **₽** Add Remove WIMAUMA, FL 33598-6138 MARIA D. GARZA MGRM **₽** Add 14852 SWEET CHARLIE CIRCLE WIMAUMA, FL 33598-6138 Remove 🗂 Add Remove Remove ſ**□** Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ___ Signature of a member or authorized representative of a member **RENE CONTRERAS JR** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00