## 10900003317

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Naı	me)
(Do	ocument Number)	)
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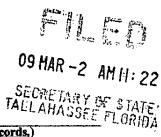
## **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT: Hard	(Name of Lim	C ited Liability Company)	
The enclosed Articles of	'Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Kirk Cole	(Name of Person)	·····
	Hardcore Truc	KS L. L. C. (Firm/Company)	· · · · · · · · · · · · · · · · · · ·
	467 Ridge Rd	Sw (Address)	
	Largo, Fi.	33770 (City/State and Zip Code)	<u></u>
For further information of	concerning this matter, please c	all:	
(Name	of Person)	at ()(Area Code & Daytime T	elephone Number)
Enclosed is a check for t	he 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)

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



Hardson Trucks I	1.0	TAELAHA	SSEE FLORIDA
Hardcore Trucks L (Name of the Limited Liabil (A Florid	ity Company as it now app a Limited Liability Compan	ears on our records.) y)	Longy
The Articles of Organization for this Limited Liability	Company were filed on _	January 8, 2009	_ and assigned
Florida document number <u>L09000003317</u>	<u></u>	,	
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."	ords "Limited Liability Cor	mpany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADI	ORESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			······································
			<del></del>
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		n our records, <u>enter the</u>	name of the new
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	* / · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		(Enter Florida street addre	255)
•		•	
<del></del>	(Citv)	, Florida	(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 Changing Registered 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 **Address Type of Action** <u>Title</u> <u>Name</u> Larry Hollis 1848 Alberta Dr. WCK ... Remove Clearwater, FL. 33756 467 Ridge Rd SW MGR ... r Add

				Remove
	<del> </del>			Add Remove
	<del></del>			Add Remove
	<del></del>			Add Remove
If amending any other informati	on, enter change(	(s) here: (Attach additi	ional sheets, if necessar	v.) 
	٠			OS MAR
ted Febuary 26	, 2009			-2 AM
ı		_		
Signa Kirk A	_	r authorized representative	ve of a member	H: 22

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Filing Fee: \$25.00