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(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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2010 DEC 10 ANH: 4

C. LEWIS

DEC 1 3 2010

EXAMINER

COVER LETTER

TO:	Registration Sec Division of Corp				
•	%	•			
SUBJE	ECT:	RAMJUD	TRUCKING LLC		
		Name of Lim	ited Liability Company		
The en	closed Articles of A	mendment and fee(s) are sul	bmitted for filing.		
Please	return all correspon	dence concerning this matter	to the following:		
			FAIRY RAMASSAR		
			Name of Person		
RAMJUD TRUCKING LLC					
Firm/Company					
336 CHELMSFORD COURT					
Address					
KISSIMMEE,FL 34758					
	City/State and Zip Code				
hardingpantin@netzero.com E-mail address: (to be used for future annual report notification)					
For fur	ther information cor	ncerning this matter, please of	·	,	
	ANTHO	NY HARDING	at (321)	443-1284	
	Name of I	Person		aytime Telephone Number	<u></u>
Englos	ed is a check for the	fallowing amount:			
		1			
<u> </u> \$25	.00 Filing Fee	₹30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	losed) Certified	te of Status &

MAILING ADDRESS:

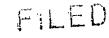
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

7 12

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2010 DEC 10 AM M: 44

	•						
RAI	MJUD TRUCKING LLC iability Company as it now appears lorida Limited Liability Company)		MAY OF STATE				
(Name of the Limited L	iability Company as it now appears	on our records.)	455that LUNIUA				
· ·	iorida Elimited Elability Company)						
The Articles of Organization for this Limited Liab	oility Company were filed on	01/27/2009	and assigned				
Florida document number L09000088	32 .						
							
This amendment is submitted to amend the follow	zina•						
This ariendment is submitted to affected the follow	ring.						
A. If amending name, enter the new name of t	he limited liability company here	:					
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compan	y," the designation "l	LLC" or the abbreviation				
Enter new principal offices address, if applicat	ole:		· · · · · · · · · · · · · · · · · · ·				
(Principal office address MUST BE A STREET ADDRESS)							
	·						
Enter new mailing address, if applicable:							
(Mailing address MAY BE A POST OFFICE BOX)							
			<u> </u>				
	,						
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 offic	ce address here:						
	CAIDY DAMAGOAD						
Name of New Registered Agent:	FAIRY RAMASSAR						
New Registered Office Address:							
	Enter Florida street address						
	, Florida						
	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.

If Changing Registered Agent, Signature of New Registered Agent

عتبية المح

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

MGR = Manager MGRM = Managing Member **Title** Name **Address Type of Action MGRM SONNY RAMASSAR** 336 CHELMSFORD COURT ☐ Add KISSIMMEE FL 34758 R'emove ☐ Add ☐ Remove Remove ☐ Add Remove \square Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **DECEMBER 03** 2010 Dated Signature of a member or authorized representative of a member

FAIRY RAMASSAR
Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00