## 10000004028

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EXAMINER



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SECRETARY OF STATE

## **COVER LETTER**

Division of Co			
SUBJECT:	т&т1	ransport, LLC	
SUBJECT.		ited Liability Company	**************************************
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing	
	ondence concerning this matter	-	
ricuse return an corresp	ondence concerning and mater	to the following.	
		Terry Lee McAvoy	
		Name of Person	
	-	T & T Transport, LLC	
		Firm/Company	
	11572 115th St.		
		Address	
	#	Largo, FL 33778	en <del>e sal·la se e l'accider accese en</del> e
	ا ا	City/State and Zip Code	
	E-mail address: (	eel532000@yahoo.com to be used for future annual report notific	ation)
For further information	concerning this matter, please o	cail:	
Te	rry L. McAvoy	at ( 727 )	160-2988
Name	of Person	Area Code & Daytime	Telephone Number
Enclosed is a check for	the 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)
		10 / C /	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Cen Tallahassee, FL 323	

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

T & T Trans	oort, LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	y <u>as it now appears (</u> shility Company)	on our records.)	
(**************************************	,p,,		
The Articles of Organization for this Limited Liability Company were filed on10/05/2010 and as			_ and assigned
Florida document numberL10000104028			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:		
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company	," the designation "LLC	C" or the abbreviation
Enter new principal offices address, if applicable:			····
(Principal office address MUST BE A STREET ADDRESS)		Ä	· =
			<u> </u>
		HAS	2 1
Enter new mailing address, if applicable:		N N N N N N N N N N N N N N N N N N N	2 01
(Mailing address MAY BE A POST OFFICE BOX)		ار اند ت	至 [77]
		\$17. LOF	<b>∷</b>
		TEATOA	<u> </u>
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:			name of the new
Name of New Registered Agent:			
New Registered Office Address:			
TOW MODIFIED STATES THE PROPERTY OF THE PROPER	Enter Florida street address		
		, Florida	
	City		Zip Code
New Degistered Agent's Signature if shanging Degistered 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:

	<u>Name</u>	Address	Type of Action
MGRM	Tonda Lee McAvoy	11572 115th St. Largo, FL 33778	Add Remove
<del></del>			Add Remove
			Add Remove
			Add Remove
			Add
<del></del>			Add
D. If amend	ing any other information, enter	change(s) here: (Attach additional sheets, if necessary.	) 
			<u></u>
	10/11	2010	
  Dated	10/11	2010	

Page 2 of 2

Filing Fee: \$25.00