L11000127676

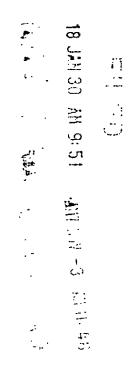
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status	_			
Special Instructions to Filing Officer:				

Office Use Only



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O SEMMONS



November 3, 2017

TYSON WARD 7970 THOMPSON NURSERY RD WINTER HAVEN, FL 33884

SUBJECT: OAKLEY TRUCKING, LLC

Ref. Number: L11000127676

We have received your document for OAKLEY TRUCKING, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 517A00022315

Octavia L Simmons Regulatory Specialist II



COVER LETTER

TO: Registration Division of C			
Oakley	Trucking LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing	
	spondence concerning this matter	•	
	Tyson Ward		
	-	Name of Person	
	Oakley Trucking LLC		
		Firm Company	
	7970 Thompson Nursery F	₹d	
		Address	
	Winter Haven FL 33884		
		City/State and Zip Code	
	tysontransportationlle(a.gm;	arl.com to be used for future annual report no	
For further information	reoncerning this matter, please ca	·	uncation)
Tyson Ward		863 287-7415	
Nam	e of Person	at () Area Code Daytii	ne Telephone Number
Enclosed is a check fo	r 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)
Regi Divi P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 thassee, FL 32314	STREET/COUR Registration Secti Division of Corpe Clifton Building 2661 Executive C Tallahassee, F1, 3	renter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Oakley Trucking LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited)	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited I	iability Company	were filed on 11/07/2011	and assigned
Florida document number L11000127676			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	oility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or th	e abbreviation "L.L."
Enter new principal offices address, if appli	cable:		是 第 1
(Principal office address MUST BE A STRE	ET ADDRESS)	7970 Thompson Nursery Rd	,
		Winter Haven FL 33884	
Enter new mailing address, if applicable:			ب ن
(Mailing address MAY BE A POST OFFICE	: BOX)	7970 Thompson Nursery Rd	D
		Winter Haven FL 33884	
B. If amending the registered agent and registered agent and/or the new registered of	l/or registered o office address her	office address on our records, <u>ent</u> <u>re</u> :	er the name of the new
Name of New Registered Agent:	Tyson Ward		
New Registered Office Address:	7970 Thompso	on Nursery Rd	
		Enter Florida street address	<u> </u>
	Winter Haven	, Florida	33884
		City	Zin 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 605, 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.

f Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>		<u>Address</u>	Type of Action
MGR	Oakley, Thomas E II	_	3054 NW Stoney Creck Ave	□ Add
			Jensen Beach Fl. 34957	□ Remove
				Change
MGR	Oakley, Patricia I.		3054 NW Stoney Creek Ave	
			Jensen Beach FL 34957	
		٠		Change
MGR Ward, Tyson	Ward, Tyson		7970 Thompson Nursery Rd	_ Add
			Winter Haven FL 33884	
				P. Change
•				ب ب Add الم
				日 RemaQ の の の の の の の の の の の の の
				Add
			-	Remove
				□ Change
	-		.	
				Remove
				□ Change

	-		
			
		<u> </u>	
			
			
			<u>7. 2.</u>
			Ţ.

C. Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the D	lock does not meet the applica	to date of filing or more than 90 day able statutory filing requiremen	(optional) ss after filing.) Pursuant to 605.0207 (3)(ts. this date will not be listed as the
f the record specifies a delaye b) The 90th day after the rec	d effective date, but not ord is filed.	t an effective time, at 12	:01 a.m. on the earlier of:
Dated October 10	2017		
		vized representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00