

L1200000160678

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

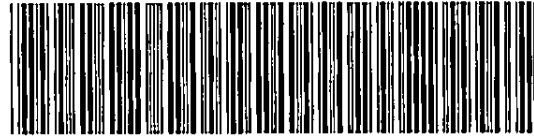
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Red Oak Transport LLC
(Name of Partnership)

DOCUMENT NUMBER: L120000060678

The enclosed Amendment to Partnership Statement and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donald S. Sargent
(Name of Person)

Red Oak Transport LLC
(Firm/Company)

18131 NW. County Road 275
(Address)

Altha, FL 32421
(City/State and Zip Code)

Sargentlisa@Outlook.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donald S. Sargent At (850) 447-0505
(Name of Person) (Area Code) (Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Red Oak Transport LLC

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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>	<u>Type of Action</u>
AMBR	Lisa A. Sargent	18131 NW. County Road	<input checked="" type="checkbox"/> Add
		275	<input type="checkbox"/> Remove
		Altamonte, FL 32421	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated August 18

2017A

Signature of a member or authorized representative of a member

Donald S. Sargent
Typed or printed name of signer

Typed or printed name of signer