

L12000118947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

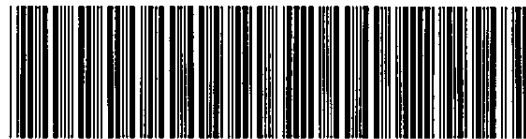
(Document Number)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

NOV 10 2014

T. BROWN

COVER LETTER

TO: Registration Section,
Division of Corporations

SUBJECT: M J Express Trucking Services, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Diane Delgado

Name of Person

MJ Express Trucking Services, LLC

Firm/Company

2312 Clark Street, Ste B-1

Address

Apopka, Florida 32703

City/State and Zip Code

D.Delgado.MJExpress@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diane Delgado

at (407) 929-3499

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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CLERK OF DISTRICT COURT
STATE OF FLORIDA
JANUARY 8, 2012

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

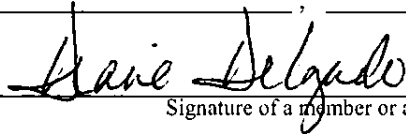
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MBR	Montanez, Angel L	222 Anson Drive	<input type="checkbox"/> Add
		Kissimmee, Florida 34758	<input checked="" type="checkbox"/> Remove
MGR	CJ Express Enterprise	851 S. State Road 434, Ste 1070-348	<input type="checkbox"/> Add
		Altamonte Springs, FL 32714	<input checked="" type="checkbox"/> Remove
MGR	Diane Delgado	2312 Clark Street, Ste B-1	<input checked="" type="checkbox"/> Add
		Apopka, FLA 32703	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated November 4, 2014



Signature of a member or authorized representative of a member

Diane Delgado

Typed or printed name of signee