

L12000137728

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

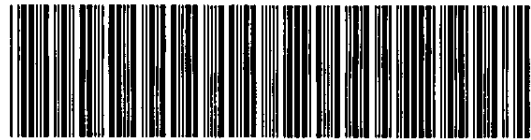
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Gutter NOV 13 2014



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 14, 2014

ROBERTO LEMUS  
15156 SW 63RD TERRACE  
MIAMI, FL 33193

SUBJECT: USA TRUCKING SERVICES, LLC  
Ref. Number: L12000137728

We have received your document for USA TRUCKING SERVICES, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Neysa Culligan  
Regulatory Specialist II

Letter Number: 114A00022021

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: USA TRUCKING SERVICES, LC**

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:

**ROBERTO LEMUS**

Name of Person

**USA TRUCKING SERVICES, LLC**

Firm/Company

**15156 SW 63RD TERRACE**

Address

**MIAMI, FL 33193**

City/State and Zip Code

**usats001@gmail.com**

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

For further information concerning this matter, please call:

**ROBERTO LEMUS**

at ( **786** ) **444-3829**

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)

**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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2014 NOV 13 PM 3: 01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

USA TRUCKING SERVICES, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 10/29/2012 and assigned  
Florida document number L12000137728.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

ROBERTO LEMUS

15156 SW 63RD TERRACE

MIAMI, FL 33193

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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 office address here:**

Name of New Registered Agent:

ROBERTO LEMUS

New Registered Office Address:

15156 SW 63RD TERRACE

Enter Florida street address

MIAMI

City

, Florida 33193

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 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.*

  
If Changing Registered Agent, Signature of New Registered Agent

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>
MGR	Gonzalo P Del Hierro	3541 14TH AVE SOUTHEAST	<input type="checkbox"/> Add
		NAPLES, FL 34117	<input checked="" type="checkbox"/> Remove
MGR	Sonia Heredia	3541 14TH AVE SOUTHEAST	<input type="checkbox"/> Add
		NAPLES, FL 34117	<input checked="" type="checkbox"/> Remove
S	Sonia Heredia	3541 14TH AVE SOUTHEAST	<input type="checkbox"/> Add
		NAPLES, FL 34117	<input checked="" type="checkbox"/> Remove
MGR	Roberto Lemus	15156 SW 63RD TERRACE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33193	<input type="checkbox"/> Remove
S	Brenda Lemus	15156 SW 63RD TERRACE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33193	<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.)*

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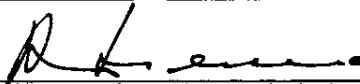
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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, 1, 2014



Signature of a member or authorized representative of a member

ROBERTO LEMUS

Typed or printed name of signer

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Filing Fee: \$25.00

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