

L13000000385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

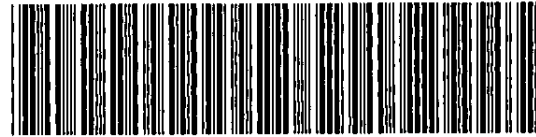
(Business Entity Name)

(Document Number)

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FILED
13 JUN 24 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
JUN 25 2013
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Walden Transport 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:

Tonjua Walden

Name of Person

Walden Transport LLC

Firm/Company

5115 N 20th St

Address

Tampa, FL 33610

City/State and Zip Code

iwalden62@yahoo.com

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

For further information concerning this matter, please call:

Tonjua Walden

Name of Person

at (813) 239-9607

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

13 JUN 24 PM 4:22

Walden Transport LLC

SECRETARY OF STATE

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

The Articles of Organization for this Limited Liability Company were filed on 01/02/2013 and assigned
Florida document number L13000000385.

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)

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:

New Registered Office Address:

Enter Florida street address

Florida

City

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 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

MGR = Manager
MGRM = Managing Member

13 JUN 24 PM 4: 22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
20th ST

Type of Action

☒ Add

☐ Remove

☐ Add

☐ Remove

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Remove

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

Adding Irwin Walden as an authorize user

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13 JUN 24 PM 4: 22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated June 13, 2013

Tonjua Walden

Signature of a member or authorized representative of a member

Tonjua Walden

Typed or printed name of signee

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Filing Fee: \$25.00