

L1400000 08313

(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



200255871532

01/24/14--01020--006 **25.00

FILED

2014 JAN 24 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 29 2013

T. HAMPTON

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **KEEP ON TRUCKING 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:

YORAIMA CALDERA

Name of Person

KEEP ON TRUCKING TRANSPORT LLC

Firm/Company

9461 EVERGREEN PLACE #306

Address

DAVIE, FL 33324

City/State and Zip Code

YORAIMA2008@HOTMAIL.COM

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

For further information concerning this matter, please call:

YORAIMA CALDERA

Name of Person

at **954 667-2380**

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

KEEP ON TRUCKING TRANSPORT LLC

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

FILED
2014 JAN 24 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01/21/14 and assigned
Florida document number L14000008313.

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)

3408 WEST 84 STREET SUITE 214

HIALEAH GARDENS, FL 33018

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3408 WEST 84 STREET SUITE 214

HIALEAH GARDENS, FL 33018

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:

YORAIMA CALDERA

New Registered Office Address:

9461 EVERGREEN PLACE #306

Enter Florida street address

DAVIE

City

Florida 33324

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 | YORIAMA CALDERA | 9461 EVERGREEN PLACE # 306 | <input type="checkbox"/> Add |
| | | DAVIE, FL 33324 | <input checked="" type="checkbox"/> Remove |
| MGR | YORAIMA CALDERA | 9461 EVERGREEN PLACE #306 | <input checked="" type="checkbox"/> Add |
| | | DAVIE, FL 33324 | <input type="checkbox"/> Remove |
| MGR | ANTONIO DELLI COLI | 1514 NW 48 LANE | <input checked="" type="checkbox"/> Add |
| | | BOCA RATON, FL 33431 | <input type="checkbox"/> Remove |
| MGR | CHRISTIAN SANDOVAL | 9461 EVERGREEN PLACE SUITE 306 | <input type="checkbox"/> Add |
| | | DAVIE, FL 33324 | <input checked="" type="checkbox"/> Remove |
| MGR | CHRISTIAN SANDOVAL | 5125 NW 116 CT | <input checked="" type="checkbox"/> Add |
| | | DORAL, FL 33178 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |

2014 JAN 24 PM 1:02
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

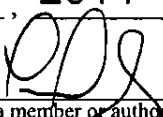
FILED

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 **JANUARY 21** **2014**



Signature of a member or authorized representative of a member

Yraima Caldera

Typed or printed name of signee

FILED
2014 JAN 24 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA