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TAIL MAY 10 PN 2: 23
SECRETARY OF STAIL
AND ASSEE, FLORIDA

D. SCOTT MAY 11 2017

COVER LETTER _

TO:	Registration Section Division of Corpo		,	· ' &	
CUD IEC	TRUCKIN' L	LC			
SUBJE	ci:	Name of Lim	ited Liability Company		
The enc	losed Articles of Ar	nendment and fee(s) are sub-	mitted for filing.		
Please r	eturn all correspond	ence concerning this matter	to the following:		
		Michael J. Faehner, Esq.			
			Name of Person		
		M. Faehner, Esq., LLC			
			Firm/Company		
		600 Bypass Drive, Suite 10	00		
			Address		
		Clearwater, FL 33764			
			City/State and Zip Code		
		filings@mfaehner.com			
		E-mail address: (i	to be used for future annual report n	otification)	
For furt	her information con	cerning this matter, please ca	all:		
Michae	l Faehner		727 443-5190		TAS =
	Name of P	erson	Area Code Dayt	ime Telephone Number	Ing Fee, L. S. Status & 2
Enclose	d is a check for the	following amount:			ma P D
\$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (

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

TRUCKIN' LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 02/07/2014	and assigned
Florida document number L14000021525	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regis	· -	er the name of the
egistered agent and/or the new registered office add	iress nere:	
Name of New Registered Agent:		S
New Registered Office Address:		
	Enter Florida street address	ANG PED
	, Florida	Zip Code ?
New Registered Agent's Signature, if changing Registere	•	16 23 E

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 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>	Type of Action
MGR	Candyman Management, LLC	468 4TH AVENUE SOUTH	■ Add
		ST PETERSBURG, FL 33701	☐ Remove
			□ Change
MGR	REPKO, ROBERT	468 4TH AVENUE SOUTH	Add
		ST PETERSBURG, FL 33701	■ Remove
			Change
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Effective date, if other th	an the date of filing:			(options	ıl)	
If an effective date is listed, the end of the listed in the listed inserted in document's effective date of	this block does not me	et the applicabl	late of filing or more the statutory filing req	an 90 days after fili uirements, this da	ng.) Pursuant to 60: tte will not be list	5.0207 ted as
ne record specifies a d The 90th day after th		ate, but not a	n effective time	, at 12:01 a.n	n. on the earli	er of
May 9	•	2017				
M	d Free	9	•			
Dated May 9	d face	9	ed representative of a		<u> </u>	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00