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And the state of the state of

J. Shivers JAN 29 2019

# TO: Registration Section 3 **Division of Corporations** The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

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

NU Approach Trucking 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	and ass	igned
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	e abbreviation "I	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)		<u>.</u>
B. If amending the registered agent and/or registered office address on our records, enter	r the name	of the new
registered agent and/or the new registered office address here:	ALC 5	
Name of New Registered Agent:	AN A	
New Registered Office Address:	116	t stands a
Enter Florida street address		Francisco Franci
, Florida	<u>∞</u>	\$15.5cm cmap 5 in
City New Registered Agent's Signature if changing Registered Agent.	五 Zip Code 三元 中	

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, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member **Title** Name | **Address Type of Action** 1nthony L. Brown 10760 SW 150 Terr 240/0 08 Miami FL 33176 David Williams 4208 David St 10/0 of-the Apt. B CLC ownership fayetle VIIIe, NC 28304 ☐ Remove ☐ Add ☐ Remove □ Add 댨 Remove □ Remove □ Add □ Remove

	nending any other information, enter change(s) here: (Attach daditional sheets, if necessary.)
	Grace Allism Williams Mas
·	75% ownership of the U.C.
Effec	ctive date, if other than the date of filing:(optional)
(The e	ffective date, if other than the date of filing: (optional)  ffective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after late this document is filed by the Florida Department of State)
Date	d
	Marc 10100
	Sace (Ikeliam
	Signature of a member or authorized representative of a member  (NOCO WILLIAMS)

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Filing Fee: \$25.00