

#L14000079813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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2014 JUL -8 AM 11:34
CLERK OF SUPREME COURT
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

JUL -9 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **MILLS TRUCKING SERVICES, 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:

GIACOMO BOSSA

Name of Person

MORIS & ASSOCIATES

Firm/Company

3650 NW 82nd AVE, SUITE 401

Address

DORAL, FL 33166

City/State and Zip Code

gbossa@anmpa.com

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

For further information concerning this matter, please call:

GIACOMO BOSSA

Name of Person

at **(305) 559-1600**

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

FILED
2014 JUL -8 AM 11:00
U.S. DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

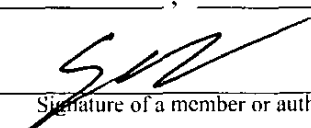
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MARCELO H MOLINA	9595 Fontainebleau Blvd Apt. 906 Miami, FL 33172	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
MGR	Carlos Arguello	15857 SW 65 TERR. MIAMI, FL 33193	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
MGR	JUAN CARLOS VILLACIS	Gaspar de Escalona N39120 Sancho Andrade. Quito-Ecuador	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
MGR	VIVIAN SOTOLONGO	401 SW 109 Ave. Apt 12 Miami, FL, 33174	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
MGR	VICTOR ALMEIDA	9595 Fontainebleau Blvd Apt 906 Miami , FL 33172	<input type="checkbox"/> Add
			<input checked="" 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.)*

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 June 25, 2014



Signature of a member or authorized representative of a member

Giacomo Bossa for MORIS & ASSOCIATES, as Registered Agent

Typed or printed name of signee

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Filing Fee: \$25.00