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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

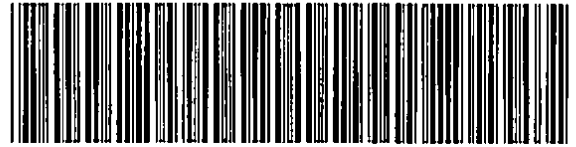
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FILED  
SECOND DEPT OF STATE  
DIVISION OF CORPORATIONS  
22 JUN 28 PM 3:22

T. MATTHEWS

JUL 13 2022



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 14, 2022

AMY HOWLETT  
804 KILGORE RD  
PLANT CITY, FL 33567

SUBJECT: BLUE DIAMOND TRANSPORTATION, LLC  
Ref. Number: L14000117313

We have received your document for BLUE DIAMOND TRANSPORTATION, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tekayla T Matthews  
OPS

Letter Number: 222A00013320

## COVER LETTER

TO: Registration Section  
Division of Corporations

RECEIVED

SUBJECT: BLUE DIAMOND TRANSPORTATION, LLC  
Name of Limited Liability Company

2022 JUN 28 AM 7:12

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DARLENE LOTT

Name of Person

BLUE DIAMOND TRANSPORTATION, LLC

Firm/Company

804 KILGORE RD

Address

PLANT CITY FL 33567

City/State and Zip Code

amy@falconsllc.com

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

For further information concerning this matter, please call:

DARLENE LOTT

813

719-1300

at ( )

Name of Person

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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
**22 JUN 28 PM 3: 22**

BLUE DIAMOND TRANSPORTATION 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 JULY 25, 2014 and assigned  
Florida document number L14000117313.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

**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

City, Florida

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 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>	<u>Type of Action</u>
MGR	DARLENE LOTT	804 KILGORE RD	<input checked="" type="checkbox"/> Add
		PLANT CITY FL 33567	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	AMY HOWLETT	P O BOX 695	<input checked="" type="checkbox"/> Add
		MARS HILL ME 04758	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LORI JELLISON	4412 DEVINSHIRE FIELDS LOOP	<input checked="" type="checkbox"/> Add
		PLANT CITY FL 33567	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PENNY MAYNARD	P O BOX 695	<input checked="" type="checkbox"/> Add
		MARS HILL ME 04758	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated MARCH 8

2022

Bruce W. Dargatz

Signature of a member or authorized representative of a member

BRUCE SARGENT

Typed or printed name of signee

**Filing Fee: \$25.00**