

L14000150281

From: TINTOS INT'L LLC

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000184989 3)))



H150001849893ABCC

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : TINTOS INTERNATIONAL LLC  
Account Number : I20150000068  
Phone : (407)731-4498  
Fax Number : (407)982-7123

FILED  
2015 JUL 31 AM 7:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: SUSTAXES@GMAIL.COM  
SUSTAXES@GMAIL.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
K & K TRANSPORTATION SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

RECEIVED  
15 JUL 31 AM 6:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

H 150001849893

N. CAMPBELL  
AUG 3 - 2015

2015-07-30 23:16:58 (GMT)

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

FILED FROM INTOS INT'L LLC

H 2015 JUL 31 1 58 PM '15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K &amp; K TRANSPORTATION SERVICES 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 09/25/2014 and assigned  
Florida document number L14000150281

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

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:

N/A

**(Principal office address MUST BE A STREET ADDRESS)**

Enter new mailing address, if applicable:

N/A

**(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:

BLANCO MUJICA, BETZI K.

New Registered Office Address:

9040 SAVANNAH MAGNOLIA LN

Enter Florida street address

ORLANDO

City

Florida 32832

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.*

*Betzi Blanco Mujica*

If Changing Registered Agent, Signature of New Registered Agent

H 150001849893

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

H 1500018498P3

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CHAVEZ GRANADO, JORGE L.	9040 SAVANNAH MAGNOLIA	<input type="checkbox"/> Add
		LANE, ORLANDO, FL 32832	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	BLANCO MUJICA, BETZI K.	9040 SAVANNAH MAGNOLIA	<input checked="" type="checkbox"/> Add
		LANE, ORLANDO FL 32832	<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
			<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.)*

N/A

H 1500018498P3

**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 605.007 (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 JULY 30TH 2015

Betzi Blanco Mujica

Signature of a member or authorized representative of a member

BETZI K. BLANCO MUJICA

Typed or printed name of signer

H 1500018498P3

FILED  
2015 JUL 31 AM 7:58  
CLERK OF THE COURT  
TALLAHASSEE, FLORIDA