

L14 000159861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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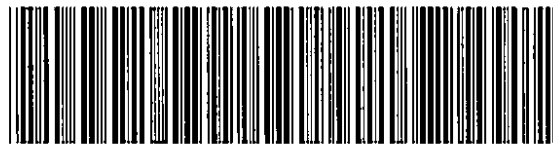
(Business Entity Name)

(Document Number)

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JUL 16 2020

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AUG 28 2020

S. YOUNG

2020 JUL 16 AM 7:26

**TO: Registration Section
Division of Corporations**

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

JOHN M. SEARS

Name of Person

Firm/Company

2129 WILLOW OAK DR.

Address

EDGEWATER FL 32141

City/State and Zip Code

MARTYJOHN59@AOL.COM

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

JOHN SEARS	443	764 9088
Name of Person	Area Code	Daytime Telephone Number

☐ \$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)

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**

JDS 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 10/14/2014 and assigned
Florida document number L14000159861.

This amendment is submitted to amend the following:

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

MARTY'S TRUCKING LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2129 WILLOW OAK DR

EDGEWATER, FL 32141

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:

JENNIFER CHARETTE

New Registered Office Address:

2129 WILLOW OAK DR

Enter Florida street address

EDGEWATER

City

Florida 32141

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.

X Jennifer Charette

If Changing Registered Agent, Signature of New Registered Agent

JENNIFER CHARETTE

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

[illegible]

[illegible]

(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)

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.

x  _____
Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

JOHN M. SEARS

Typed or printed name of signee

Filing Fee: \$25.00