## 50000/2031

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JUN - 3 2015

## **COVER LETTER**

TO:

Registration Section **Division of Corporations** 

CUDIFICE.	L&R1	FRUCKING SERVICES LLC		
SUBJECT:		nited Liability Company	<del></del>	
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
		ALAN MARTINEZ		
		Name of Person		
SIMPLEX GROUP				
		Firm/Company		
		5800 NW 74TH AVE		
		Address		
		MIAMI, FL 33166		
		City/State and Zip Code		
		amartinez@simplexgroup.net		
	E-mail address: (	to be used for future annual report notif	ication)	
For further information of	concerning this matter, please c	all:		
ALAN MARTINEZ	/ SIMPLEX GROUP	at (		
Name o	of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for t	he 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		STREET/COURII Registration Section Division of Corpora	1	
P.O. B	sox 6327 assee, FL 32314	Clifton Building 2661 Executive Cer		

Tallahassee, FL 32301

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



L & R TR	UCKING SERVICES LLC	" L, /	HASSELUT STAR
(Name of the Limited Lia (A Flo	bility Company as it now appea rida Limited Liability Company)	rs on our records.)	HASSEE FI ONIN
e Articles of Organization for this Limited Liability	y Company were filed on	01/20/15	and assigned
orida document number L15000012031			
nis amendment is submitted to amend the following	:		
. If amending name, <u>enter the new name of the l</u>	imited liability company h	ere:	
e new name must be distinguishable and contain the words "I	Limited Liability Company," the	designation "LLC" or the a	abbreviation "L.L.C."
nter new principal offices address, if applicable:	7101 NW	109TH PL	
Principal office address MUST BE A STREET AD	DRESS) DORAL, I	L 33178	
nter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX)</u>	DOD	NW 109TH PL AL, FL 33178	
. If amending the registered agent and/or re	gistered office address of	n our records, <u>ente</u>	the name of the
egistered agent and/or the new registered office a	ddress here:		
Name of New Registered Agent:			
New Registered Office Address:	7101 NW 109TH PL		
-	Enter Flo	orida street address	
_	DORAL	, Florida _	33178
	City		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

r removed	from our records:	nanage, enter the title, name, and address	ILFO	
AGR = M	lanager	Address  Add		
	Authorized Member			
<u> </u>	<u>Name</u>	Address TAILLAHAS	Type of Action  SFF - 1 At	
MGR	VICTOR A ROMERO	7101 NW 109TH PL		
		DORAL, FL 33178	□ Remove	
			☑ Change	
MGR	CARLOS F LUGO	7101 NW 109TH PL	Add	
		DORAL, FL 33178	Remove	
		<u> </u>	<b>⊠</b> Change	
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Effect	ctive date, if other than the date of filing:	05 0207 (3
Note:	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list ament's effective date on the Department of State's records.	
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	record specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earne 90th day after the record is filed.	lier of:
Datad	MAY 23RD 2015	
Dated	×4	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00