

h15000032545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

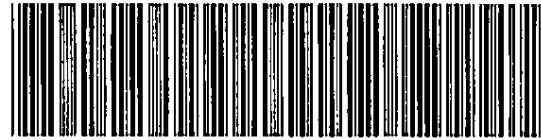
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Worldwide Trailer 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:

Jerry L Monts de Oca, Sr  
Name of Person  
Worldwide Trailer LLC  
Firm/Company  
19175 N Dale Mabry Hwy  
Address  
Lutz FL 33548  
City/State and Zip Code  
jcamer@worldwidedoor.com  
E-mail address: (to be used for future annual report notification)

2022 JUL 19 AM 11:48  
FILED  
TALLAHASSEE, FL 32303  
CLERK OF SUPERIOR COURT

For further information concerning this matter, please call:

Jerry Monts De Oca  
Name of Person  
813 870-0003 ext 101  
at ( ) Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

Worldwide Trailer 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 2/20/2015 and assigned  
Florida document number L15000032545.

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 "L.L.C."

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*

\_\_\_\_\_, Florida \_\_\_\_\_  
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

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	MICHAEL CLAUS	19175 N DALE MABRY HWY	<input type="checkbox"/> Add
		LUTZ, FL 33548	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	MICHAEL CLAUS	19175 N DALE MABRY HWY	<input type="checkbox"/> Add
		LUTZ FL 33548	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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TALLAHASSEE, FL 32304  
CLERK OF SUPERIOR COURT

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FBI - TAMPA  
TAMPA POLICE

7-10

**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.

Dated July 14, 2022

Signature of a member or authorized representative of a member

Jerry L Monte De Oca  
Typed or printed name of signer

**Filing Fee: \$25.00**

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000032545

Entity Name: WORLDWIDE TRAILER LLC

Current Principal Place of Business:

101 W PALMETTO ST  
BLOG B  
ARCADIA, FL 34266

Current Mailing Address:

19175 N DALE MABRY HWY  
LUTZ, FL 33548 US

FEI Number: 47-3189063

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MONTES DE OCA, JERRY L SR.  
19175 N DALE MABRY HWY  
LUTZ, FL 33548 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida*

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	MONTES DE OCA, JERRY L SR	Name	CLAUS, MICHAEL
Address	19175 N DALE MABRY HWY	Address	19175 N DALE MABRY HWY
City-State-Zip	LUTZ FL 33548	City-State-Zip	LUTZ FL 33548

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: JERRY L MONTES DE OCA SR

MGR

01/25/2022

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date