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DEC 08 2015  
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## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: NOAH'S ARK TRUCKING 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:

SHORON AMANDA RAMOTAR

Name of Person

NOAH'S ARK TRUCKING LLC

Firm/Company

16569 SW 31ST CIR

Address

OCALA, FL 34473

City/State and Zip Code

RICHARDRAMOTAR@GMAIL.COM

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

For further information concerning this matter, please call:

SHORON AMANDA RAMOTAR

Name of Person

at (317)

Area Code

885 7391/0595

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/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

NOAH'S ARK 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 8/26/15 and assigned  
Florida document number L15000746032.

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)**

16569 SW 31<sup>ST</sup> CIR

OCALA, FL 34473

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

16569 SW 31<sup>ST</sup> CIR

OCALA, FL 34473

**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:**

SHORON AMANDA RAMOTAR

**New Registered Office Address:**

16569 SW 31<sup>ST</sup> CIR

Enter Florida street address

OCALA

City

Florida

TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

2015 DEC -7

34473  
Zip Code

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**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>
<u>PRESIDENT</u>	<u>SHORON AMANDA RAMOTAR</u>	<u>16569 SW 31ST CIR</u>	<input type="checkbox"/> Add
		<u>OCALA, FL 34473</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
<u>MGR</u>	<u>RICHARD CHRISTOPHER RAMOTAR</u>	<u>16569 SW 31ST CIR</u>	<input type="checkbox"/> Add
		<u>OCALA, FL 34473</u>	<input type="checkbox"/> Remove
			<input checked="" 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

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