7/8/2019

**Division of Corporations** 

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.

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To:				
	Division of Cor	•		,
	Fax Number	: (850)617-6383		
From:				
		: TRUCKING PERMITS A	ND MORE LLC	
	Account Number			
		: (813)774-4726 : (813)877-2186		
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Electronic Filing Menu

Corporate Filing Menu

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## **COVER LETTER**

TO:	Registration Sec Division of Corp				
CUDIE		RANSPORT LLC			
SUBJE	.c.:	Name of Limi	ted Liability Company		
The end	closed Articles of	Amendment and fee(s) are subt	nitted for filing.		
Please i	return all correspo	ndence concerning this matter t	to the following:		
		FRED PEREZ, WILFRED	O		
			Name of Person		
		YAZMIN TRANSPORT L	LC		
			Firm/Company		2019
		113 ZACALO WAY			
			Address		- X - 2 E
		KISSIMMEE, FL 34743			PH 15
		willtrucking03@gmail.com	City/State and Zip Code		. Ω
		E-mail address: (	to be used for future annual report n	otification)	
For fur	ther information o	concerning this matter, please ca	all:		
FRED	PEREZ, WILFRE	EDO	407 9229735		
	Name o	f Person	at () Area Code Days	rime Telephone Number	
Enclos	ed is a check for t	he following amount:			
	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
		ING ADDRESS:	STREET/COU Registration Sec	RIER ADDRESS:	

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YAZMIN TRANSPORT LLC		
(Name of the Limited Liab)	lity Company as it now appears on our reco	ords.)
(A Floric	da Limited Liability Company)	
	- 11/11/2015	
The Articles of Organization for this Limited Liability	Company were filed on 117772013	and assigned
Florida document number L15000191312		
rionda document namoci	<del></del>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
A. If amending name, enter the new maint of the int	mees name, company non-	20
		- 50
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
•		= 3
Enter new principal offices address, if applicable:		
-	DECC)	
(Principal office address MUST BE A STREET ADD	<u></u>	
		71 J. <del>5.</del>
		. w
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
Whitting undress in the birth of the best		
B. If amending the registered agent and/or reg	sistered office address on our reco	rds, enter the name of the new
registered agent and/or the new registered office ad	idress here:	
Name of New Registered Agent:		
New Registered Office Address:		
- · ·	Enter Florida street ad	dress
		Elosido
	City	, Florida
	City	220 0000
New Registered Agent's Signature, if changing Register	red Agent:	
		I Contan access to comply with the
I hereby accept the appointment as registered ager	nt and agree to act in this capacity. I	i juriner agree to comply wan the
provisions of all statutes relative to the proper and	complete performance of my aunes	ne E.C. On ifthis document is
accept the obligations of my position as registered	agent as provided for in Chapter of	JS, F.S. Or, y inis accument is
being filed to merely reflect a change in the registe	ered office address, I hereby confirm	і таі іне итней наонну
company has been notified in writing of this chang	ge.	

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> BONILLA MERCADO, YAZMIN	Address 113 ZACALO WAY	Type of Action
VP	BONTILA MIRKOATA, TAZIMIN	113 ZACALO WAT	
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Effective data it	f other than the dat	e of fillna:		(optional)	
(If so effective date is Note: If the date	thisted, the date must be a inserted in this block (	e to intag: specific and campot be prior to o foes not meet the applicable ment of State's records.	see of filing or more than 90 or estalutory filing requirement	by after filing.) Pursuant to	605-0207 (3) listed as the
the record spec ) The 90th day	ifies a delayed eff y after the record	fective date, but not a is filed.	л effective tims, at 1	2:01 a.m. on the ea	rtier of:
Dated <u>07</u>	/08	2019		1. <del>*</del>	
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Filing Fee: \$25.00