L15000203850

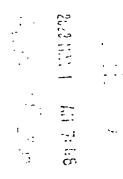
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



000407800170

05/01/23--01030--008 **43.75



A. RIVERS

COVER LETTER

TO:

Tallahassee, FL 32314

	legistration Se Division of Cor						
eud iezw	Allied Trucking of Orlando, L.L.C						
SUBJECT	ı:						
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.				
		ondence concerning this matter					
		Alejandro Cusco					
			Name of Person				
	Allied Trucking of Orlando, L.L.C. Firm/Company						
		10761 NW 89th Avenue					
			Address				
		Hialeah Gardens, FL 33018					
			City/State and Zip Code				
		Acusco@alliedtk.com					
		E-mail address: (to be used for future annual report noti	fication)			
For further	r information c	oncerning this matter, please ca	all:				
Claudio J	ordan		786 458-6543				
	Name o	f Person	at () Area Code Daytim	e Telephone Number			
Enclosed i	s a check for th	ne following amount:					
□ \$25.00	0 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)			
	lailing Addres Legistration S		<u>Street Address:</u> Registration Se	ction			
Division of Corporations			Division of Corporations				
P.O. Box 632		.7	The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	d Liability Comp A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Lia Florida document number L15000203850			and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liab	oility company here:	
N/A			
The new name must be distinguishable and contain the wo	ords "Limited Liab	lity Company," the designation "LLC" or the	: abbreviation "L.L.C."
Enter new principal offices address, if applica	N/A		
(Principal office address MUST BE A STREE)	<u>T ADDRESS)</u>		
Enter new mailing address, if applicable:	N/A		
Mailing address MAY BE A POST OFFICE I	BOX)		
B. If amending the registered agent and/or reagent and/or the new registered office addres Name of New Registered Agent:	•	address on our records, enter the n	ame of the new regi
	N/A		. 83
New Registered Office Address:		Enter Florida street address , Florida	
		City	Zip Com
New Registered Agent's Signature, if changing R	legistered Agent	•	<u> </u>

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 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>	Type of Action
V.P.	Daniel Merino	10761 NW 89th Avenue	
		Hialeah Gardens, FL 33018	□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□ Add
			Remove
			□Remove
			□Change
			□ Add
			Channe

D. If amer	iding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
_	
_	
_	
_	
_	
_	
_	
_	
_	
_	
_	
(If an effe <u>Note:</u>	ve date, if other than the date of filing:
If the record record is file	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 ed.
Dated _	Signature of a member or authorized representative of a member
	EDUNZO G CUSCO

Filing Fee: \$25.00

Typed or printed name of signee



June 16, 2023

ALEJANDRO CUSCO 10761 NW 89TH AVE. HIALEAH GARDENS, FL 33018

SUBJECT: ALLIED TRUCKING OF ORLANDO, LLC

Ref. Number: L15000203850

We have received your document for ALLIED TRUCKING OF ORLANDO, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6353.

Alecia Rivers Regulatory Specialist III

www.sunbiz.org

C DO DOM GOOD DIN 1 DI 1 DI GOO

Letter Number: 923A00013629