L16000017984

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	. <u>.</u>
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
	siness Entity Nan	20)
(bu	siness Entity Nan	ie)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
\checkmark		
	J DENNIG	
	DEC - 1 2023	

Office Use Only



400418356264

11/03/23--01027--015 *+25.00

2023 NOV -3 AM 9: 25

COVER LETTER

	istration Se ision of Cor				
SUB ILCT.			TRUCKING ELC		
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	l Anicles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspo	ndence concerning this matter t	to the following:		
			LUIS A MENDOZA		
		<u> </u>	Name of Person		
		ME	NDOZA TAX SERVICES LLC		
			Firm/Company		
			2701 MICHIGAN AVE, STE J		
			Address		
			KISSIMMEE, FL. 34744		
		ec	City/State and Zip Code ontact@mendozaaccounting.com		
		E-mail address: (to be used for future annual report notif	fication)	
For further in	iformation c	oncerning this matter, please ca	11:		
	LUIS A N	MENDÓZA	407 750 8464 at ()		
	Name o	f Person	at () Area Code Daytimo	e Telephone	Number
Enclosed is a	check for th	ne following amount:			
■ \$25.00 I	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (Additional copy is enclosed)	C	50.00 Filing Fee, Certificate of Status & Certified Copy Additional copy is enclosed)
	iling Addres		Street Address:	,	
	gistration S	Section Corporations	Registration Sec Division of Cor		
	7181011 01 C D. Box 632	-	The Centre of T		ಆ

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 NOV -3 AM 9:25

ALMEIDA TRUCKING LLC

(Name of the Limited Liability Company as it now appears on our records.)

	(A Florida Limited Liability Compa	my)	
The Articles of Organization for this Limited L Florida document number £16000017984		01/26/2016	and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	of the limited liability compan	y here:	
The new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if appli	cable: N/A.	<u> </u>	
(Principal office address MUST BE A STREE			
Enter new mailing address, if applicable:	N./A.		
(Mailing address MAY BE A POST OFFICE	<u></u>		
B. If amending the registered agent and/or agent and/or the new registered office add Name of New Registered Agent:	registered office address on o ress here: N/A		
New Registered Office Address:	N/AEnt	<u> </u>	
	Ente	er Florida street address.	
		, Florida _	Zip Code
	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 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>	Address	Type of Action
MGR	VILLA, LUZ MAGALY	3482 DUSK AVE, KISSIMMEE, FL 34744	□Add
	<i>j</i>		Remove
			Change
			□Add
			□Remove
			□Change
			□Adđ
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
	/		□Chang c

	
•	
_	
)
	
n effective date i te: If the date	if other than the date of filing:
ecord specifies is filed.	s a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Date	ed — OCTORBER 26, 2023 — ———
	A CONTRACTOR OF THE PARTY OF TH

Filing Fee: \$25.00

Typed or printed name of signee