6/21/2017

Division of Corporations



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : IRUCKING PERMITS AND MORE LLC

Account Number : I20140000047 Phone : (813)774-4726 Fax Number : (813)774-4726

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

 Address:			
 annress:			



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN D & D TAMPA TRANSPORT LLC

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DIVISION OF COST OF ATTOMS

COVER LETTER

TO:	Registration Section of Corpo	ion Prations		
		A TRANSPORT LLC		
SUBJE	CT:	Name of Limits	d Liability Company	
The enc	losed Articles of A	mendment and fee(s) are subm	itted for filing.	
Please r	eturn all correspon	dence concerning this matter to	the following:	
		HERNANDEZ DORADO,	ARGENIS	
			Name of Person	
		D&D TAMPA TRANSPOR	RT LLC	
			Firm/Company	
		943 W CIMMERON DR		<u>. </u>
			Address	
		TAMPA, FL 33603		
			City/State and Zip Code	
		E-mail address: (:	u be used for future annual report notifi	cation)
For fu	rther information c	oncerning this matter, please ca	sil:	
HER	NANDEZ DORAD	O, ARGENIS	813 7033704 at ()	
	Name o	î Person	Area Code Dayrime	Telephone Number
Enclo	sed is a check for t	he following amount:		
	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (#dditional 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
Taliahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D&D TAMPA TRANSPORT LLC		
(Name of the Limited Chability (A Florida)	Company as it now appears on our records,)	
The Articles of Organization for this Limited Liability Co	ompany were filed on <u>03/02/2016</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the Ilmi		
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or	the abbreviation "L.J.C."
Enter new principal offices address, if applicable:		9 E =
(Principal office address MUST BE A STREET ADDR	(ESS)	- <u>8 2</u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		AH 8: 59
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, <u>p</u> <u>lress here</u> :	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida straet address	
	Flor	ida <u></u>
	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

Title	Name	Address	Type of Action
MGR	MARTINEZ, GILBERTO	943 W CIMMERON DR	= Add
		TAMPA, FL 33603	□ Remove
			Change
		0.2	
			□ Remove
			Change
			BANG T
			DE MANGE TO CHánge T
			BAdd J. T. C. C. Add J. S.
			Remove
			□ Change
			□ Remove
			Change
			□ Remove
			□ Change

					
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Effective date, if other (if m effective date is listed Note: If the date insert document's effective de	ed in this block do	es not theel the app	ICADIC SIZIOISI , TITTO	(option 90 days after requirements, this	nal) filing.) Pursuant to 605.020 date will not be listed as
the record specifies The 90th day aft	a delayed effe or the record is	ctive date, but i s filed.	not an effective ti	me, at 12:01 a	.m. on the earlier o
Deted Washing		<u>6/21</u>	12917		
	Signal	ture of a member of a	nhorized representative	of a member	
/)	11.	11/11/02	inted name of signee		
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Filing Fee: \$25.00