

L1600048918

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : TINTOS INTERNATIONAL LLC
Account Number : I20150000068
Phone : (407)731-4498
Fax Number : (407)982-7123

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CLEVER TRUCK SERVICES, LLC

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 AUG 19 AM 8:36

APPROVED
AND
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2022 AUG 19 PM 4:52

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AUG 22 2022

K. Brumblie

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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CLEVER TRUCK SERVICES, 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 03/09/2016 and assigned
Florida document number 1.16000048918.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

Florida

City

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TALLAHASSEE, FLORIDA

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AND
FILED

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

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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>
MGR	DAYANA VILLAMIZAR	11159 NW 122ND ST	<input checked="" type="checkbox"/> Add
		UNIT 106	<input type="checkbox"/> Remove
		MEDLEY, FL 33178	<input type="checkbox"/> Change
AMBR	Carlos Alberto Torres Quintero	11159 NW 122ND ST	<input checked="" type="checkbox"/> Add
		UNIT 106	<input type="checkbox"/> Remove
		MEDLEY, FL 33178	<input type="checkbox"/> Change
AMBR	FELIX Y PERNA VELANDRIA	11159 NW 122ND ST	<input type="checkbox"/> Add
		UNIT 106	<input checked="" type="checkbox"/> Remove
		MEDLEY, FL 33178	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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