L16 CCCC 50295

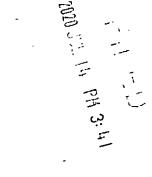
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Statu	ıs
Special Instructions to Filing Officer:	

Office Use Only



100345417211

06/11/20--01002--020 **25.00



Anund Manie

JUL 25 2020
ALBRITTON

COVER LETTER

TO:

, Registration Section

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Div	ision of Cor	porations			
SUBJECT:	CETT Trucking, LLC				
		Name of Lin	nited Liability Company		
The encloses	d Articles of	Amandment and Social are sub-			
		Amendment and fee(s) are sub			
Please return	all correspo	ndence concerning this matter	to the following:		
		Climmie Gibson			
			Name of Person		
		CETT Trucking LLC			
		_	Firm/Company		
		845 Rushing-St 102		<u>.</u>	
			Address		
		Jacksonville, FL 322009-	32218		
			City/State and Zip Code		
		climmie l @gmail.com	to be used for future annual report notif		
For further in	formation co	ncerning this matter, please co		(canon)	
Climmie Gib	son		904 258-3868 at ()		
	Name of	Person		Telephone Number	
Enclosed is a	check for the	e following amount:			
■ \$25.00 F	iling 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)	
<u>Mail</u> Reg	ing Address: istration Se	ection	Street Address: Registration Sect	tion	

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RECEIVED
JUL 1 4 2020



June 29, 2020

CLIMMIE GIBSON 16334 DAWNWOOD CT JACKSONVILLE, FL 32218

SUBJECT: CETT TRUCKING LLC Ref. Number: L16000050293

We have received your document for CETT TRUCKING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6050.

Letter Number: 220A00012819

Irene Albritton Regulatory Specialist II

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CETT Trucking, LLC

2020 July PH 3:41 (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 Cor	mpany were filed on 03/10/2016	and assigned
Florida document number L16000050293		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
Gibson Trucking, LLC		
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u></u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of agent and/or the new registered office address here:		he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
	City	rida 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

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	Shawndrea Thomas-Gibson	16334 Dawnwood Ct	= Add
		Jacksonville, FL 32218	🗀 Remove
		 -	□ Change
			
			□Remove
			□Change
			□Add
		-	□Remove
			□Change
			□Add
			□Change
			🗀 Add
		·	□Remove
			□Change
			□Remove
			□ Champa

-			
_			
			
		•	
			
	······································		
			
			
ie: It the date inserted in	an the date of filing: ate must be specific and cannot be prior to this block does not meet the applicab the Department of State's records.	date of filing or more than 90 le statutory filing requiren	(optional) days after filing.) Pursuant to 605.0 nents, this date will not be listed
cord specifies a delayed of filed.	ffective date, but not an effective tim	e, at 12:01 a.m. on the ear	ier of: (b) The 90th day after
	2020		
June 8			
ed June 8	- Clamin	Idela	

Filing Fee: \$25.00