

L16000064505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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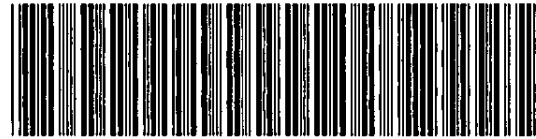
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY

MAR - 6 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ultimate Sunshine Trucking Company, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Yves Belmont Jr.
Name of Person

Ultimate Sunshine Trucking Company, LLC
Firm/Company

500 NW 2 Avenue unit 10641
Address

Miami, FL 33101
City/State and Zip Code

KingB7427@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yves Belmont Jr. at (786) 202-6335
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 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)

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
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Ultimate Sunshine Trucking Company, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 3/31/16 and assigned
Florida document number L16000064505.

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

6700 NW 27 Avenue
Miami, FL 33147

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 470812
Miami, FL 33247

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:

Yves Belmont Jr.

New Registered Office Address:

6700 NW 27 Avenue

Enter Florida street address

Miami, Florida FL 33147
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.

Yves Belmont Jr.
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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Sylvester Phillips III	14401 NW 16 Drive	<input type="checkbox"/> Add
		Miami, FL 33167	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Johnathan Phillips	14401 NW 16 Drive	<input type="checkbox"/> Add
		Miami, FL 33167	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	yves Belmont Jr.	P. O. Box 470812	<input checked="" type="checkbox"/> Add ^{VB}
		Miami, FL 33247	<input type="checkbox"/> Remove
		or	
		6700 NW 27 Avenue	<input checked="" type="checkbox"/> Change
		Miami, FL 33147	<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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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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TALLAHASSEE, FLORIDA


E. Effective date, if other than the date of filing: 2/27/17 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated February 27, 2017

Yves Blum 

Yves Belmont Jr.
Typed or printed name of signer