

L6000 177891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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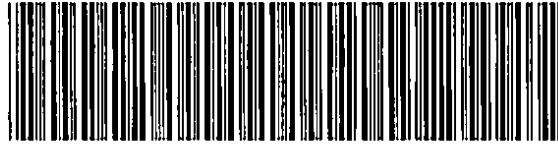
(Business Entity Name)

(Document Number)

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2019 FEB 11 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FL

R. WHITE
FEB 18 2019

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: SNS FREIGHT LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

SALVADOR LANDIVAR

Name of Person

SNS FREIGHT LLC

Firm/Company

6115 HARTFORD ST

Address

TAMPA 33619

City/State and Zip Code

salvador_landivar@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DANIEL SERRANO ZAMORA

727 698-1201
at (_____) _____

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

FILED

SNS FREIGHT LLC

2019 FEB 11 PM 4:12

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

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA
RECEIVED
SEP 23 2016

The Articles of Organization for this Limited Liability Company were filed on SEPTEMBER 23RD 2016 and assigned
Florida document number L6000177891.

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 "LLC."

Enter new principal offices address, if applicable:

6115 HARTFORD ST

Principal office address MUST BE A STREET ADDRESS

TAMPA FL 33619

Enter new mailing address, if applicable:

6115 HARTFORD ST

Mailing address MAY BE A POST OFFICE BOX

TAMPA, FL 33619

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:

New Registered Office Address:

Enter Florida street address

City Florida 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	DANIEL SERRANO ZAMORA	119 N MERCURY AVENUE	<input checked="" type="checkbox"/> Add
		CLEARWATER, FL 33765	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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Effective date, if other than the date of filing: _____ (optional)

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.

Dated JANUARY 15TH 2019



Signature

SALVADOR AUGUSTO LANDIVAR SUAREZ

Page 3 of 3

Filing Fee: \$25.00