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SECRETARY OF STATE
TALL ANASSES FOR

D. BRUCE SEP 22 2020

## **COVER LETTER**

SUBJECT:	Isa/Se/ F Name of Lim	Trucking LL		
The englaced Articles of A	Amendment and fee(s) are sub			
		-		
Please return all correspon	idence concerning this matter	to the following:		
	İsabel	M. Draz de Name of Person	Menjivar	
		Firm/Company		
	8161	James four D	<i>(</i> ·	
	_ Winte	City/State and Zip Code	884	
	E-mail address: (	to be used for future annual report no	tification)	2020 A 2020 A SECR TAL
For further information co	ncerning this matter, please c	ali:		LAIS.
I Sade/ Name of	M· ();«)	to be used for future annual report no all: at () Area Code Daytin	ne Telephone Number	PM 6: 01
Enclosed is a check for the				<del></del>
	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
Mailing Address		Sa		

Mailing Address:

TO:

**Registration Section Division of Corporations** 

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

- 15 albert Truckin		
( <u>Name of the Limited Liability Company a</u> (A Florida Limited Liabi	isAt now appears on our records.) ility Company)	
The Articles of Organization for this Limited Liability Company wer Florida document number 10000179999.	re filed on 9/27/20/6	and assigned
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 C	Company "the decimption "LLC" or the abbrev	Win 491 C.
The new hame must be distinguishable and contain the words. Elimited Liability C	Sompany, the designation EEC of the above;	ration (LSL.C.
Enter new principal offices address, if applicable:		三 三
(Principal office address MUST BE A STREET ADDRESS)		$\frac{\partial}{\partial t} = \frac{1}{\omega}$
_	<u> </u>	
	<u>.</u>	Ch Ch
Enter new mailing address, if applicable:		크, 호
(Mailing address MAY BE A POST OFFICE BOX)		
maning address mai be at our office box		
_		
B. If amending the registered agent and/or registered office add	ress on our records, enter the name of	f the new registered
agent and/or the new registered office address here:	,	
Name of New Registered Agent:		
New Police of Office Address		
New Registered Office Address:	Enter Florida street address	
	res 1.a	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
	to get in this connection I forther come	to comply with the
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as provibeing filed to merely reflect a change in the registered office additionally company has been notified in writing of this change.	rformance of my duties, and I am fami wided for in Chapter 605, F.S. Or, if to	iliar with and his document is

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	<u>Name</u>	Address	Type of Action
MGR	Isabel M. Diaz de Mesjivar	8/6/ Jamestown Dr.	□Add
		Winter Hoven, FL 33884	□Remove
			KChange
AMBR	Alberto Menjivas	8/6/ Jane, Lyn Dr.	□ Add
		Winter Hum, FL. 33884	□Remove
			🗆 Add
			Rendered PH Charles
			C) To To
			Add 1
			Change
			□Add
			□Remove
			Change
	······································		□Add
			□Remove
			∏ Change

This amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  This amendment is concerning the change being mode		
to the current positions within the company. Alberto		
Menjivar is now the AMBR and Isabel M. Diaz de		
Menjuar is the MGR.	<del></del>	
	<del></del>	
<del></del>	<u>_</u> 29	
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(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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.		
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a ecord is filed.	after the	
Dated July Signature of a member or authorized representative of a member		
Typed or printed name of signee	-	