L16 000199454

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COVER LETTER . . .

TO:

Tallahassee, FL 32314

TO: Registration Solution of Col		·	
21112 112 27772	SPORTATION, LLC.	4	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Charles H. Kinsey		
		Name of Person	
	CK Transportation, LLC.		
	Name of Person CK Transportation, LLC. Firm/Company 21091 NW 22 Avenue #135 Address Miami Gardens, FL 33056 City/State and Zip Code charleskinsey0@gmail.com E-mail address: (to be used for future annual report notification) mation concerning this matter, please call:		
	21091 NW 22 Avenue #13	55	
		Address	
	Miami Gardens, FL 33056		
		City/State and Zip Code	
English on information		·	mileation)
	concerning this matter, please c		
Charles H. Kinsey		at (
Name o	of Person	Area Code Dayti	me Telephone Number
Enclosed is a check for t	he 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 Addre		Street Address:	
Registration Division of C		Registration S Division of Co	
P.O. Box 632	-	The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CK Transportation, LLC.		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as <mark>it now appears on our record</mark> Liability Company)	<u>(s.</u>)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.16000199454}{}$.	were filed on 10/28/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
C&D Kinsey Lawn Maintenance, LLC.		
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)		<u> </u>
Enter new mailing address, if applicable:	,	CD
(Mailing address MAY BE A POST OFFICE BOX)		3
		- 100
	· · · · · · · · · · · · · · · · · · ·	<u> </u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres.	7
	, Flo	orida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr	ec to act in this capacity. I fin	rther 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			Remove
			☐Change
			□Add
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	Charles H'x	Linguage of a member or authorized representative of	a member	
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Filing Fee: \$25.00