

L17000025529

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(Address)

(Address)

(City/State/Zip/Phone #)

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FEB 23 2017

S. YOUNG

FILED
SECRETARY OF STATE
17 FEB 22 AM 10:51

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wolfepack Excavation 3 Trucking 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:

Donald N Bostick
Name of Person

Wolfepack Excavation 3 Trucking LLC
Firm/Company

11312 Citra Circle #304
Address

Windermere FL 34786
City/State and Zip Code

dallas68@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donald N Bostick at (407) 567-8453
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

17 FEB 22 AM 10:51

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Wolfepack Excavation 3 Trucking LLC
(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 Company were filed on 2.1.17 and assigned
Florida document number L 17000025529

This amendment is submitted to amend the following:

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

WOLFPACK Excavation 3 Trucking LLC
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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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>
AMBR	Jerry D. Ramos	7810 Crosswater Trail	<input checked="" type="checkbox"/> Add
		#5210	<input type="checkbox"/> Remove
		Windermere Fl 34786	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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17 FEB 22 6:10 PM '02

17 FEB 22 2110:51

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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 _____,


Signature of a member or authorized representative of a member

Donald N Bostick Jr
Typed or printed name of signer