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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRUCKING PERMITS AND MORE LLC

Account Number : I20140000047 Phone : (813)774-4726

Fax Number

: (813)877-2186

Enter the email address for this business entity to be used for fu annual report mailings. Enter only one email address please.\*

Email Address:\_\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ACANDA TRUCKING SERVICES LLC

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## **COVER LETTER**

ro: Registration Sec Division of Corp					
	RUCKING SERVICES LLC				
SUBJECT:	Name of Limit	ed Liability Company			
The analogad Articles of A	Amendment and fee(s) are subm	nitted for filing.			
	ndence concerning this matter to				
	GUERRA BARBAN, LIZE	TTE			
	<u></u>	Name of Person			
	ACANDA TRUCKING SE	RVICES LLC			
		Firm/Company			
	7021 DANEWOOD CT		<u></u>	2021 N	
		Address			
	TAMPA, FL 33615			<b>芸 ム</b>	-
	saradechlau@gmail.com	City/State and Zip Code	Ĺ	2021 HAY -3 PH 4: 46 SECRETARY DE STATE	
	E-mail address: (t	o be used for future annual report notific	ation)	FE 6	
For further information c	oncerning this matter, please ca	all:			
GUERRA BARBAN, LI	ZETTE	305 2166247 at ()			
Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is a check for the	he following amount:				
₹ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
Mailing Addre Registration Division of (	Section	Street Address: Registration Sect Division of Corp			
P.O. Box 633	27	The Centre of Ta	ıllahassee	0	
Tallabacces	EL 20214	2415 N. Monroe	Street, Suite 81	U	

Tallahassee, FL 32314

2415 N. Monroe Street, Tallahassee, FL 32303

Page: 4 of 6

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ACANDA TRUCKING SERVICES LLC							
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our record Liability Company)	<u>is.</u> )					
The Articles of Organization for this Limited Liability Company Florida document number L17000090262	were filed on 04/24/2017	and assigned					
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limited liab	oility company here:						
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC	C" or the abbreviation "L.L.C."					
Enter new principal offices address, if applicable:	2303 W COMANCHE AVE						
(Principal office address MUST BE A STREET ADDRESS)	TAMPA, FL 33603						
Enter new mailing address, if applicable:	2303 W COMANCHE AVE	2021 HAY					
(Mailing address MAY BE A POST OFFICE BOX)	TAMPA, FL 33603						
		SSEE TO					
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter	r the name of the new register					
Name of New Registered Agent:							
New Registered Office Address:							
	Enier Florida street address						
	, Florida						
	City	Zip Code					
New Registered Agent's Signature, if changing Registered Agent	<u>t:</u>						
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet	ree to act in this capacity. If the performance of my duties, t	urther agree to comply with and I am familiar with and					

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 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>	Name	Address	Type of Action
AMBR	GUERRA BARBAN, LIZETTE	7021 DANEWOOD CT	□Add
		TAMPA,FL 33615	≅Remove
			☐ Change
			□Add
			□Remove
			CG Change
			<b>芸術 占 F</b>
			ARY OF STATE
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To: 18506176383

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