

L17000046597

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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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(Business Entity Name)

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(Document Number)

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MAR 11 2019

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 11, 2019

KELLIE A CARROLL  
2701 SW 154 LANE  
DAVIE, FL 33331

SUBJECT: NO 1 BOBCAT AND TRUCKING & SON, LLC  
Ref. Number: L17000096597

2019 MAR 21 PM 4:50  
SECRETARY OF STATE  
TALLAHASSEE, FL

We have received your document for NO 1 BOBCAT AND TRUCKING & SON, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU MUST SUBMIT ALL PAGES 1 THRU 3 FOR FILING.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair  
Regulatory Specialist II

Letter Number: 519A00004888

RECEIVED  
2019 MAR 21 PM 12:20  
SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: No 1 Bobcat and Trucking & Son, LLC  
Name of Limited Liability Company

2018 MAR 21 PM 4:50  
TALLAHASSEE, FL 32301  
REGISTRATION SECTION

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kellie Carroll  
Name of Person

\_\_\_\_\_  
Firm/Company

2701 SW 154 Lane  
Address

Davie, FL 33301  
City/State and Zip Code

KCarroll21210@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kellie Carroll at (954) 473-2245  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

No 1 Bobcat and Trucking & Son, LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

2019 MAR 21 PM 4:50  
FILED  
CLERK OF CIRCUIT COURT  
JACKSONVILLE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 5/1/2017 and assigned Florida document number L17000090597

This amendment is submitted to amend the following:

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

No. 1 Bobcat and Trucking, LLC  
The new name must be distinguishable and contain the words "Limited Liability Company" or 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

Florida

City

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.*

Heidi Carroll

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

(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 605.0207 (3)(b)

If 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 after the record is filed.

Dated 3/18, 2019

Kelli Carroll Signature of the member

Signature of a member or authorized representative of a member

Kellie Carroll

Typed or printed name of signee