7/12/2018

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Tc:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRUCKING PERMITS AND MORE LLC

Account Number : 120140000047 Phone

: (813)774-4726 : (813)877-2186 Fax Number

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

Email Address:\_\_\_

OD

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN YETRUCKING LLC

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## **COVER LETTER**

TO: Registration Se Division of Cor			
Y E TRUC			
SUBJECT:	Name of Limi	ted Liability Company	<u> </u>
The real and Emister of	Amendment and fee(s) are sub-	nined for filing	
	ndence concerning this matter t		
riease return an correspo	ndence concerning this traiter i	o the knowing.	
	LABRADOR LUIS, YANI	ΣΥ	
		Name of Person	
	Y E TRUCKING LLC		
		Firm/Company	<del></del>
	5138 N MATANZAS AVE		
	<del></del>	Address	
	TAMPA, FL 33614		
		City/State and Zip Code	
	labradoryandy07@gmail.	com to be used for future annual is	port potification)
For facther information c	oncerning this matter, please or		•
			1284
LABRADOR LUIS, YA	of Person	at ()	Daytime Telephone Number
. Time C	,		, ,
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)	Certificate of Status &
Regist Divisio P.O. E	ANG ADDRESS: ration Section on of Corporations Jux 6327 assee, FL 32314	Registrati Division o Clifton B	/COURIER ADDRESS: on Section of Corporations ailding entive Center Circle

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Y E TRUCKING LLC				
(Name of the Limited Liability Compa	ny as it now appears ou our records.) ability Company)		-	
The Articles of Organization for this Limited Liability Company Florida document number L17000102118	were filed on 05/08/2017	and a	nssignee	d
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	llity company here:			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the ab	breviation	"L.L.C."	
Enter new principal offices address, if applicable:	4805 BONITA VISTA DR			
(Principal office address MUST BE A STREET ADDRESS)	TAMPA, FL 33634			<del></del>
Enter new mailing address, if applicable:	4805 BONITA VISTA DR		<del>-</del>	<del></del>
(Mailing address MAY BE A POST OFFICE BOX)	TAMPA, FL 33634		-	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her  Name of New Registered Agent:	ffice address on our records, <u>enter</u> e:	the nan	16 of t	he new
New Registered Office Address:		<del>- 1</del>	,	ي. ج <u>ره ر</u>
	Enter Florida street address	<u> </u>	2	: . "T
·	, Florida City	77m/Cu		
New Registered Agent's Signature, if changing Registered Agent:	•	Zip/Cu	] <sub>1</sub> : 52	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am provided for in Chapter 605, F.S. Or,	lamiliar - if this d	with ar ocumer	nd
If Cha	nging Registered Agent, Signature of New R	egistered /	<u>\gent</u>	

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
MGR	LABRADOR, YOERLANDY	4805 BONITA VISTA DR	Add
		TAMPA, FL 33634	🗆 Remove
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