# 11700123156

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## Mary R Gonzalez

### **RETURN ADDRESS:**

7403 GATEHOUSE CIR APT 153 ORLANDO, FL 32807

786-843-0485

#### **COVER LETTER**

SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	MARY R GONZALEZ		
		Name of Person	<del></del>
	MKJ TRANSPORTATION	R LLC	
		Firm/Company	
	7403 GATEHOUSE CIR /	APT 153	
		Address	<del></del>
	ORLANDO FL 32807		
	KARENZMAX@YAHOO.	City/State and Zip Code ES	
	E-mail address: (	to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	all;	
MARY R GONZALEZ		786 843-0485	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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** 

TO:

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

#### TO **ARTICLES OF ORGANIZATION OF**

MKJ TRANSPORTATION LLC	
(Name of the Limited L (A F	ability Company as it now appears on our records.) lorida Limited Liability Company)
he Articles of Organization for this Limited Liabil orida document number L17000123156	ity Company were filed on and assigned
his amendment is submitted to amend the following	g:
. If amending name, enter the new name of the	OCT OCT
ne new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the abbreviation "LC"
nter new principal offices address, if applicable	DDRESS)
Principal office address MUST BE A STREET A	DDRESS)
	<u> </u>
inter new mailing address, if applicable:	
<u> 1 Aailing address MAY BE A POST OFFICE BO</u>	0
. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the address here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
<u>-</u>	, Florida

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

#### or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	MARY R GONZALEZ	7403 GATEHOUSE CIR APT 153	■ Add
		ORLANDO FL 32807	Remove
MGR	MARY R GONZALEZ	7403 GATEHOUSE CIR APT 153	■ Add
		ORLANDO FL 32807	□ Remove
			Change
	<del></del>		
			□ Remove
			Conge
			□ Chamge
			Remove
			Change
			Add
			□ Remove
			Change

. If amending any other information, enter change(s) here: (Attach additional sho	eets, if necessary.)
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	TOCT PO
	OCT PO
	M 10: 20
	<u>*</u> "
Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than Note: If the date inserted in this block does not meet the applicable statutory filing requir document's effective date on the Department of State's records.	
the record specifies a delayed effective date, but not an effective time, a  ) The 90th day after the record is filed.	t 12:01 a.m. on the earlier of:
Dated Octobe 17 3017	
Signature of a men	
А	
Hary R. Gozselez Typed or printed marie of signee	

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Filing Fee: \$25.00