9/22/2017



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000250213 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PROMINENT SERVICES INC

Account Number : 120150000063 Phone

: (305)889-2880

Fax Number

: (305)889-2861

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TRUCKING SOLUTIONS USA LLC

Certificate of Status	0	
Certified Copy	0	
Page Count	01	
Estimated Charge	\$25.00	

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COVER LETTER

Division of C			
TRUCKI SUBJECT:	NG SOLUTIONS USA LLC		
3000RC1:		nited Linbility Company	
		,	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	RAMON GAMBOA DIA	z	•
		. Name of Person	
•	TRUCKING SOLUTION	S USA LLC	
		Firm/Company	
	1841 NW 166 STREET		
		Address	
	MIAMI GARDENS, FL 3	3054	
		City/State and Zip Code	
	Name of Limited Limbility Company F Amendment and fee(s) are submitted for filing. ondence concerning this matter to the following: RAMON GAMBOA DIAZ Name of Person TRUCKING SOLUTIONS USA LLC Firm/Company 1841 NW 166 STREET Address MIAMI GARDENS, FL 33054 City/State and zip Code FRANKGAMBOA 1990@YAHOO.COM E-mail address: (to be used for future annual report notification) concerning this matter, please call: AZ 786 419-1573 Area Code Daytling Telephone Number the following amount: □ \$30.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy Certified Copy (additional copy is enclosed)		
For faither hiformation			
RAMON GAMBOA D	IAZ	786 419-1573	
Name	of Person	Area Code Doytline	Telephone Number
inclosed is a check for	the following amount:		
325,00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	LING ADDRESS:	STREET/COURIE Registration Section	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallabassoc, Pl. 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahussee, FL 32301

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09/22/2017 PRI 18:25 FAX

1417002502153))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1

(Name of the Llinited Liability Count (A Florida Limited	any as It now appears on our records.) Linbility Company)
	were filed on 07/12/2017 and assigned
Florida document number L17000149930	
This amendment is submitted to amend the following:	90 81
A. If amending name, enter the new name of the limited list	ollity company hero:
·	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.C."
Enter new principal offices address, if applicable:	1451 WEST 29TH STREET LOT 22
Principal office address MUST BE A STREET ADDRESS)	tion for this Limited Liability Company were filed on T. L17000149930 itted to amend the following: inter the new name of the limited Hability company here: inishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LA". Idea address, if applicable: IIIALEAH, FL 33012 IIIALE
	7, 3
Enter new mailing address, if applicable:	1451 WEST 29TH STREET
er new maning address, it applicable:	
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her	
Name of New Registered Agent: JOANNEL FE	RNANDEZ GUERRA
New Registered Office Address: 1451 WEST 29	9TH STREET LOT 22
	Enter Florida streat address
HIALEAH	, Florida 33012
	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.

If Changing Sepistered Agent, Signature of New Registered Agent

Page 1 of 3

((H170002502133))

(CHI) 000 250 2133))

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

ľ

MGR = . Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	JOANNEL PERNANDEZ GUERR	1451 WEST 29TH STREET	≌ Add
	· ·	LOT 22	Ветоvе
		HIALEAH, FL 33012	Change
			□ Ad∂
			□ Remove
			Change
	i		Add ST TI Rethore
			Change D Add
			Add Remove
			Change
			
	·		CI Remove
			Chunge
			Add
			□ Remove

<i></i>	Signature of a me	mber or authorized repres	- mutative of a member		
	:				_
SEPTEMBER 22		2017 			
e 90th day after th		2017			
cord specifies a de	elayed effective dat	e, but not an effe	ctive time, at 12:	01 a.m. on the	earller o
nent's effective date or	n the Department of Stol	te's records.			
If the date inscried in	nn the date of filing: date must be specific and or this block does not med	t the applicable statuic	ing or more than 90 days	after filing.) Pursuant s, this date will not b	to 605.020 ic listed a
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