

L17000195333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

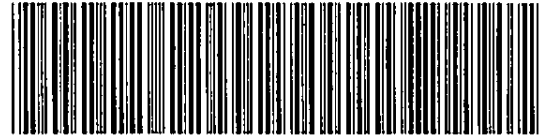
(Business Entity Name)

(Document Number)

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FILED
SEP 26 2017
JULIA S. S. S.

D SCOTT
SEP 26 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D&F Cargo Express LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Damaris Suarez

Name of Person

D&F Cargo Express LLC

Firm/Company

2812 33rd ST W

Address

Lehigh Acres FL, 33971

City/State and Zip Code

dyfcargoex@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Damaris Suarez

239

878-4225

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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
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**

D&F Cargo Express LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on September 20, 2017 and assigned
Florida document number L17000195333.

This amendment is submitted to amend the following:

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

D&F Cargo Express LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2812 33rd ST W

(Principal office address MUST BE A STREET ADDRESS)

Lehigh Acres FL, 33971

Enter new mailing address, if applicable:

2812 33rd ST W

(Mailing address MAY BE A POST OFFICE BOX)

Lehigh Acres FL, 33971

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:

Damaris Suarez

New Registered Office Address:

2812 33rd ST W

Enter Florida street address

Lehigh Acres

, Florida 33971

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 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>
OWNER	Damaris Suarez	2812 33rd ST W	<input checked="" type="checkbox"/> Add
		Lehigh Acres FL, 33971	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Damaris Suarez	2812 33rd ST W	<input checked="" type="checkbox"/> Add
		Lehigh Acres FL, 33971	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Damaris Suarez	2812 33rd ST W	<input checked="" type="checkbox"/> Add
		Lehigh Acres FL, 33971	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated _____, _____.

Damaris Suarez

Filing Fee: \$25.00