## 117000203705

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## **COVER LETTER**

oun ie c		N TRUCKING LLC				
SUBJEC	1;	Name of Lim	ited Liability Company	<del></del>		
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please ret	um all correspo	ndence concerning this matter	to the following:			
		TAMECIA SCOTT				
			Name of Person			
		TILGHMAN TRUCKING	LLC			
	Division of Corporations  UBJECT:  TILGHMAN TRUCKING LLC  Name of Limited Liability Company  the enclosed Articles of Amendment and fee(s) are submitted for filing.  lease return all correspondence concerning this matter to the following:  TAMECIA SCOTT  Name of Person  TILGHMAN TRUCKING LLC  Firm/Company  4405 W. Atlantic Blvd Apt 1206  Address  Coconut Creek, FL 33063  City/State and Zip Code  tscottedd@gmail.com  E-mail address; (to be used for future annual report notification)  or further information concerning this matter, please call:  AMECIA SCOTT  Name of Person  Area Code  Daytime Telephone Number  nelosed is a check for the following amount:  1 \$25.00 Filing Fee  Certificate of Status  Certificate of Status & Certificate Copy  (additional copy is enclosed)  Certificate of Status & Certificate Copy					
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:  TAMECIA SCOTT  Name of Person  TILGHMAN TRUCKING LLC  Firmt/Company  4405 W. Atlantic Blvd Apt 1206  Address  Coconut Creek, FL 33063  City/State and Zip Code  tscottedd@gmail.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:						
SUBJECT: The enclose Please reture TAMECIA Enclosed is	Address					
		Coconut Creek, FL 3306	33			
		City/State and Zip Code				
		<del>-</del> -				
Car firehan	r information a		•	ication)		
		oncerning this matter, please ca	111.			
TAMECI	A SCOTT		850 322-2766 at ( )			
	Name of	f Person	Area Code Daytime	Telephone Number		
Enclosed :	is a check for th	ne following amount:				
\$25.00	0 Filing Fee	-	Certified Copy	Certificate of Status &		

MAILING ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TILGHMAN TRUCKING LLC		
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L17000203705	were filed on 10/2/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:	4405 W. Atlantic Blvd Apt 1206	
(Principal office address MUST BE A STREET ADDRESS)	Coconut Creek, FL 33066	W10
		6- 30 E V
Enter new mailing address, if applicable:	<del></del>	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		T 20
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		the name of the new
Name of New Registered Agent:		
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	
	Enter Florida street address	
	, Florida	Zip Code
	Cuy	лр Соае

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>	Address	Type of Action
MGR	TAMECIA SCOTT	4405 W. Atlantic Blvd APT 1206	
		Coconut Creek, FL 33066	■ Remove
			☐ Change
MGR	IRVING TILGHMAN	4405 W. Atlantic Blvd #1206	Add
		Coconut Creek, FL 33066	Remove
			Change
AMBR	IRVING TILGHMAN	4405 W. Atlantic Blvd #1206	Add
		Coconut Creek, FL 33066	□ Remove
		<del></del>	Change
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(If an ef Note:	ive date, if other than the date of filing:  4/30/2018  (optional)  fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Put If the date inserted in this block does not meet the applicable statutory filing requirements, this date will ment's effective date on the Department of State's records.	irsuant to 605.0 I not be listed	)207 (3 I as th
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on 90th day after the record is filed.	the earlier	r of:
	-/ /		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00