

# L17000 252 389

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2019 AUG 19 AM 1:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

V. SULKER

AUG 27 2019

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Trunkers 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:

Candace Brown  
Name of Person

Trunkers  
Firm/Company

2832 Valley Forge St  
Address

Sarasota FL 34231  
City/State and Zip Code

hellotrunkers@201.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Candace Brown at (941) 928-3121  
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**

Trunkers 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 12/11/17 and assigned Florida document number L17000252389

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

Candace Brown 2832 Valley Forge S  
Sarasota FL 34231  
Same principal - NO  
Change

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAA  
No change

**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:

No change

New Registered Office Address:

Enter Florida street address  
City, Florida

FILED  
2019 AUG 19 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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>
<u>Partner</u>	<u>William Wisell</u>	<u>2827 Valley Forge St</u>	<input type="checkbox"/> Add
		<u>Sarasota FL 34231</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>Manager</u>	<u>Bradford Singiser</u>	<u>3804 Sun Eagle Lane</u>	<input checked="" type="checkbox"/> Add
		<u>Bradenton, FL 34210</u>	<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
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 8.9, 2019

Carol Braun  
Signature of a member or authorized representative of a member

Candace Brown  
Typed or printed name of signer