L18000002204

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(-1-	,	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	e)
(Dc	ocument Number)	
(· · · · · · · · · · · · · · · · · · ·	
Cartified Canine	Continue	of Chabus
Certified Copies	_ Certificates	or Status
Special Instructions to	Filing Officer:	

Office Use Only



500374040065

09/30/21--01012--013 **25.00

unhin

COVER LETTER

Division of Corporations
SUBJECT: Right Choice Hauling LLC Name of Limited Liability Company
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:
Miguel Sanchez Name of Person
Right Choice Hauling LLC Firm/Company
2710 Dunbar St Address
Ft. Pierce FL 34947 City/State and Zip Code
Final address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Miguel Sanchez at (772) 577-9125 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\bigcup \\$30.00 Filing Fee \& \bigcup \\$55.00 Filing Fee \& \bigcup \\$55.00 Filing Fee \& \bigcup \\$60.00 Filing Fee. Certificate of Status \& \bigcup \\$60.00 Filing Fee. Certificate of Status \& \bigcup \\$60.00 Filing Fee. Certificate of Status \& \bigcup \\$60.00 Filing Fee.
Mailing Address: Registration Section Street Address: Registration Section

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Right Chaice Hau (Name of the Limited Liability Compar (A Florida Limited L	ling (CC
(A Florida Limited L	iability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L180000 2204</u> .	were filed on $\frac{1/27/21}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2710 Dunbar St.
(Principal office address MUST BE A STREET ADDRESS)	2710 Dunbar St. Ft. Pierce, Fl. 34947
Enter new mailing address, if applicable:	PO 130X 13
(Mailing address MAY BE A POST OFFICE BOX)	PO BOX 13 Ft. Pierce, FL 34954
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent: Migue	ell-Sanchez:
New Registered Office Address: 2710 3	Suntar S+ Enter Florida street address
FIP	rece Florida 34947 City Zip Code
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	Σ.,
hereby accept the appointment as registered agent and agre	

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 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
			□Add
			□ Remove
			☐ Change
			□Add
			□ Remove
			□ Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change

_	
_	
_	
_	
_	
_	
_	
_	
'aati	o data if other than the data of filing:
te:	te date, if other than the date of filing:
cord is file	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 d.
ted _	September 27 . 2021 Miguel Sugar Signature of a member or authorized representative of a member
	Miguel drages
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member Miguel Sanchez

Filing Fee: \$25.00