

41800000 7028

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

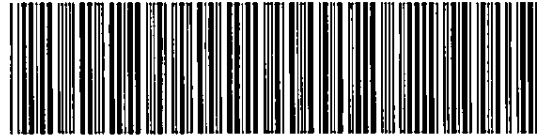
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 JUN - 1 PM 2:20

N COOPER

JUN 04 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRUCKING AND TRUCKING 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:

DIBARTOLOMEO ROSMINA

Name of Person

TRUCKING AND TRUCKING

Firm/Company

6185 SW 48 CT

Address

DAVIE FL 33314

City/State and Zip Code

TRUCKINGANDT@GMAIL.COM

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

For further information concerning this matter, please call:

DIBARTOLOMEO ROSMINA

954

3055827739

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**

TRUCKING AND TRUCKING 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 01/18/2018 and assigned
Florida document number L180000007028.

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)

6185 SW 48 CT

DAVIE FL

33314

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6185 SW 48 CT

DAVIE FL

33314

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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:

DIBARTOLOMEO ROSMINA

New Registered Office Address:

6185 SW 48 CT

Enter Florida street address

DAVIE

Florida

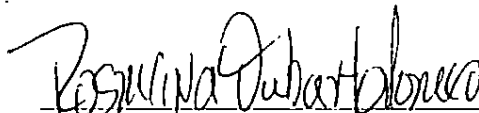
33314

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>
MGR	DIBARTOLOMEO ROSMINA	6185 SW 48 CT	<input checked="" type="checkbox"/> Add
		DAVIE FL 33314	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DAGOBERTO PEREZ	11500 NW SOUTH RIVER DR	<input type="checkbox"/> Add
		MEDLEY FL 33178	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RUBEN RODRIGUEZ	11500 NW SOUTH RIVER DR	<input type="checkbox"/> Add
		MEDLEY FL 33178	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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(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:

Dated MAY 30 2018

Rosanna Albuquerque
Signature of a member

Signature of a member or authorized representative of a member

DIBARTOLOMEO ROSMINA

Typed or printed name of signee