

1/16/2018

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L1800001694

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000019578 3)))



H1800001957834BC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : TRUCKING PERMITS AND MORE LLC
Account Number : 120140000047
Phone : (813)774-4726
Fax Number : (813)877-2186

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
X STAR TRUCKING LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

RECEIVED

JAN 22 2018

Electronic Filing Menu

Corporate Filing Menu

Help

JAN 23 2018
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: X STAR 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:

FERNANDEZ, MARIA C

Name of Person

X STAR TRUCKING LLC

Firm/Company

2410 S LINCOLN AVE

Address

LAKELAND, FL 33803

City/State and Zip Code

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

For further information concerning this matter, please call:

FERNANDEZ, MARIA C

Name of Person

at (305) 432-7860

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

Jan 22 18:09:16a

p.1

850-617-6381

1/22/2018 9:09:39 AM PAGE 1/001 Fax Server



January 22, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

X STAR TRUCKING LLC
2410 S LINCOLN AVE
LAKELAND, FL 33803US

SUBJECT: X STAR TRUCKING LLC
REF: L18000007694

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The attached form must be completed in order to file the document.

If you have any further questions concerning your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist II
Registration Section

FAX Aud. #: H18000019578
Letter Number: 418A00001271

RECEIVED
JAN 22 2018

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

X STAR 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 01/09/2018 and assigned Florida document number L18000007694.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

City Florida 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	MORALES FERNANDEZ, KAREL	2410 S LINCOLN AVE	<input checked="" type="checkbox"/> Add
		LAKELAND, FL 33803	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

35

36

37

38

39

40

41

42

43

44

45

46

47

48

49

50

51

52

53

54

55

56

57

58

59

60

61

62

63

64

65

66

67

68

69

70

71

72

73

74

75

76

77

78

79

80

81

82

83

84

85

86

87

88

89

90

91

92

93

94

95

96

97

98

99

100

Effective date, if other than the date of filing: 1-2-2018 (optional)

Dated January 22 2018

Typed or printed name of signer

Filing Fee: \$25.00