L18000014432

Division of Corporations

Florida Department of State

Division of Corporations

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To:

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

From:

Account Name : TRUCKING PERMITS AND MORE LLC
Account Number : I2014000004 7
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: _____

RECEIVED
2018 MAY -1 PM 5:00
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2018 MAY -1 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

ALAN R TRUCKING LLC

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

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MAY 02 2018

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: ALAN R 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:

RODRIGUEZ, ALEXANDER
Name of Person

ALAN R TRUCKING LLC
Firm/Company

1705 SANCHEZ AVE
Address

LAKELAND, FL 33801
City/State and Zip Code

PEREZC1204@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RODRIGUEZ, ALEXANDER at (813) 6597051
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

ALAN R 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 01/16/2018 and assigned Florida document number: L18000014432

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)

11390 STAR RD
WEEKI WACHEE, FL 34613

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

11390 STAR RD
WEEKI WACHEE, FL 34613

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2018 MAY -1 AM 10:45
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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: MISLEYDI CARDENAS

New Registered Office Address: 11390 STAR RD
Place Florida street address

WEEKI WACHEE, Florida 34613
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

Title	Name	Address	Type of Action
MGR	RODRIGEZ, ALEXANDER	1705 SANCHEZ AVE	☐ Add
		LAKELAND, FL 33801	■ Remove
			☐ Change
MGR	CARDENAS, MISLEYDI	11390 STAR RD	■ Add
		WEEKI WACHEE, FL 34613	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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TALLAHASSEE, FLORIDA
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2018 MAY 11 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

E. Effective date, if other than the date of filing: _____ **(optional)**

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 605.0206(3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 05/01/18

Signature of a member or authorized representative of a member

ALEXANDER RODRIGUEZ

Typed or printed name of signer

Filing Fee: $25.00