

L18000034373

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

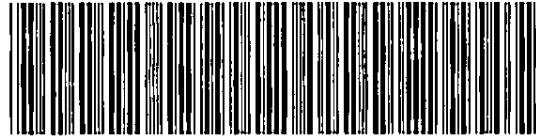
(Business Entity Name)

(Document Number)

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AUG 31 2020

S. YOUNG

2020 JUL 21 AM 7:12

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JCL TRANSPORT SERVICES 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:

JAMES A. LENO

Name of Person

JCL TRANSPORT SERVICES LLC

Firm Company

4300 BISCAYNE BLVD STE 203

Address

MIAMI, FLORIDA 33137

City/State and Zip Code

JAMES@JCLTRANSERVICES.COM

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

For further information concerning this matter, please call:

JAMES A. LENO

305 746-4667

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 Address:

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

and assigned

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

4300 BISCAYNE BLVD STE 203

MIAMI, FLORIDA 33137

(Mailing address MAY BE A POST OFFICE BOX)

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

, Florida

Civ.

Zip Code

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

This image shows a single page from a notebook or ledger. The page is white and features approximately 20 evenly spaced horizontal black lines running across its width. There are no vertical margin lines, text, or other markings present on the page.

(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.

JAL
Dated ~~June 16~~ July 17 2020

James A. Sew
Signature of a member or authorized representative of a member

James A. Leno
Typed or printed name of signee

Filing Fee: \$25.00