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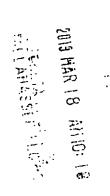
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO:

TO:	Registration Se Division of Cor			2018
CHID III		CKING SERVICES LLC		1 1
SUBJEC	UI:	Name of Lim	ited Liability Company	AND THE PARTY OF T
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		EULALISIS ORTIZ		
			Name of Person	
		3041 LONGSHORE AVE	Firm/Company	
		PHILADELPHIA, PA 191	Address 49	
		JAYTRUCKINGSERVICE	City/State and Zip Code S@GMAIL.COM	
		E-mail address: (to be used for future annual report noti	fication)
For furth	ner information c	oncerning this matter, please co	all:	
EULAL	ISIS ORTIZ		305 713-7168 at ()	
	Name o	f Person		e Telephone Number
Enclosed	l is a check for th	ne 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)
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co	on rations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

JAY TRUCKING SERVICES LLC

ARTICLES OF C	ORGANIZATION	€.
O	F	and assigned
JAY TRUCKING SERVICES LLC		53.0
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.)	
(, , , , , , , , , , , , , , , , , , ,		
The Articles of Organization for this Limited Liability Company	were filed on 02/28/2018	and assigned
Florida document number L18000054020		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
<u> </u>		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company " the designation "LLC" or the	he abbreviation "L. I. C."
		12 LUNIO I MILION
Enter new principal offices address, if applicable:	8740 NW 97 AVE APT 204	
(Principal office address MUST BE A STREET ADDRESS)	MEDLEY, FL 33178	
Enter new mailing address, if applicable:	8740 NW 97 AVE APT 204	
(Mailing uddress MAY BE A POST OFFICE BOX)	MEDLEY, FL 33178	
The state of the s	-	
B. If amending the registered agent and/or registered of	ffice address on our records, en	ter the name of the new
registered agent and/or the new registered office address her		ter the name of the new
	_	
Name of New Registered Agent:		
Traine of the winegistered rigent.		<u></u>
New Registered Office Address:	P 276 + 1 + 1	
	Enter Florida street address	
	, Florida	
	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>	Name	Address	Type of Action	
				
			Remove	
			Change	
				
		 	Remove	
			Change	
		<u> </u>		
			□ Remove	
			Change	
		 	□ Remove	
			☐ Change	
			Add	
			Remove	
			Change	
			☐ Remove	
			Change.	

. 11 411	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	·· ·
Note:	tive date, if other than the date of filing: [Coptional] [Rective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the next's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	2019
	Signature of member or authorized representative of a member
	LAZARO J MARRERO Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00