

L18000125786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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NOV 04 2020

S. YOUNG

2020 SEP 28 PM 6:53
CLERK OF SUPERIOR COURT
STATE OF CONNECTICUT
JUDICIAL BRANCH 1100

FILED

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: **RAPID TRUCKING PLUS 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:

LAZARO DOMINGUEZ

Name of Person

Firm/Company

461 EVERGLADES BLVD S

Address

NAPLES FL 34117

City/State and Zip Code

arelys@rapidtruckingnaples.com

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

For further information concerning this matter, please call:

LAZARO DOMINGUEZ

239 370-1278
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

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

RAPID TRUCKING PLUS 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 05/18/2020

Florida document number L18000125786

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

RAPID PLUS LLC

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:

LAZARO DOMINGUEZ

New Registered Office Address:

461 EVERGLADES BLVD S

Enter Florida street address

NAPLES

City

Florida 34117

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

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2020 SEP 28 PM 6:53
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DALLAS, TEXAS

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	LAZARO DOMINGUEZ	461 EVERGLADES BLVD S	<input type="checkbox"/> Add
		NAPLES FL 34117	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	RAPID TRUCKING HOLDING		<input type="checkbox"/> Add
			<input checked="" 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
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			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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.

Signature of a member or authorized representative of a member

LAZARO D DOMINGUEZ
Typed or printed name of signee

Filing Fee: \$25.00