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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE OF DIVISION OF CORPORATIONS

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COVER LETTER

Div	ision of Corpor	rations			
SURJECT:	ETRUCKONI	LINE123 L.L.C.			
30 D/13011		Name of Limite	ed Liability Company		
The enclosed	l Articles of An	nendment and fee(s) are subm	itted for filing.		
Please return	all corresponde	ence concerning this matter to	the following:		
		Jack Whittle			
			Name of Person		
			Firm/Company		
		26 Calumet Rd			
			Address		
		Westport, CT 06880			
			City/State and Zip Code		
	_	jack.whittle@ymail.com			
		E-mail address; (to	be used for future annual	report notification	3)
For further in	ntormation conc	erning this matter, please call	l:		
Jack Whittle	•		203 243	3-0619	
	Name of Pe	rtson	203 243 at () Area Code	Daytime Teler	phone Number
Enclosed is a	check for the f	following amount:			
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

ETRUCKONLINE123 L.L.C.		
(Name of the Limited	d Liability Company as it now appears on our r A Florida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Lia Florida document number L18000181116		8 and assigned
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	7 × × × × × × × × × × × × × × × × × × ×
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE B</u>	(OX)	UG -6 PM 2: 53
B. If amending the registered agent and/o registered agent and/or the new registered offi		cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street d	ıddress
		, 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Guy. Frederick	3596 Pleasant Valley Rd	
		Syracuse, NY	□ Remove
		13080 USA	
AMGR	Roberts, Nancy	1616 Salt Springs Rd	
		Syracuse, NY	□ Remove
		E3214 USA	■ Change
AMGR	Fantacone, Michael	5197 Forest Edge Dr.	⊒ Add
		Syracuse, NY	□ Remove
		13215 USA	Change
AMGR	Kochan, Stephen	1199 Lacy Rd	■ Add
		Skaneateles, NY	☐ Remove
		13152 USA	☐ Change
AMGR	FRISCH, PAMELA	5 Wheeler Dr.	□ Add
		Fayetteville, NY	□ Remove
		13066 USA	☐ Change
MGR	WHITTLE, JACK	26 Calumet Rd	
		Westport, CT	□ Remove
		06880 USA	
			Change

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Effective date, if other than the date of filing:	(optional)	0207 (3)4
Note: If the date inserted in this block does not meet the applicable statutory filir		
document's effective date on the Department of State's records.		
the record specifies a delayed effective date, but not an effective	time at 12:01 a.m. on the earlie	or of:
The 90th day after the record is filed.	time, at 12.01 a.m. on the eame	;; U(,
0		
Dated 1 LUGU 5+ 2 2018		
Dated August Z 2018 Con a Constant Signature of a member or muthorized representative		

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee