

2/8/2019

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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H190000461273ABC/

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## To:

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

## From:

Account Name : TRUCKING PERMITS AND MORE LLC  
Account Number : I20140000047  
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: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
D Y L LOGISTICS LLC

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

T. CLINE  
FEB 12 2019  
EXAMINER

2019 FEB 11 AM 10:33

Electronic Filing Menu

Corporate Filing Menu

Help

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: D Y L LOGISTICS 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:

PENA, MANUEL

\_\_\_\_\_  
Name of Person

D Y L LOGISTICS LLC

\_\_\_\_\_  
Firm/Company

MELTON AVE APT 222

\_\_\_\_\_  
Address

TAMPA, FL 33614

\_\_\_\_\_  
City/State and Zip Code

dyltruck@gmail.com

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

For further information concerning this matter, please call:

PENA, MANUEL

321 2005721  
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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
2019 FEB 11 AM 9:18  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D Y L LOGISTICS 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 01/11/2019 and assigned  
Florida document number L19000013618.

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)

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:

New Registered Office Address:

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	PENA, MIGUEL	4805 MELTON AVE APT 222	<input type="checkbox"/> Add
		TAMPA, FL 33614	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2019 FEB 11 AM 9:18  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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

2018 FEB 11 AM 9:11 8  
SECURITY OF STATE  
ATLANTA, GEORGIA

**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 605.0207 (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 FEB. 11 2019

Signature of a member or authorized representative of a member

PENA, MANUEL

Typed or printed name of signee

To: Page 2 of 7  
850-617-6381

2019-02-11 15:07:36 (GMT)  
2/11/2019 9:41:15 AM PAGE

18132001059 From: Trucking Permits And More LLC  
1/001 Fax Server



February 11, 2019

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

D Y L LOGISTICS LLC  
4805 MELTON AVE APT 222  
TAMPA, FL 33614US

SUBJECT: D Y L LOGISTICS LLC  
REF: L19000013618

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Tammi Cline  
Regulatory Specialist III

FAX Aud. #: B19000046127  
Letter Number: 519A00002870

2019 FEB 11 AM 10:33

P.O BOX 6327 - Tallahassee, Florida 32314