

L19 0000 20947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2021 JUN -4 A 8:44

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S.C.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2021 JUN -4 AM 11:27

TALLAHASSEE, FL

May 26, 2021

DOYLE SAUL/DAWN SAUL  
2452 N.E. 200TH AVE  
WILLISTON, FL 32696

SUBJECT: SAUL TRUCK REPAIR LLC  
Ref. Number: L19000020947

We have received your document for SAUL TRUCK REPAIR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LLP, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Summer Chatham  
OPS

Letter Number: 521A00011310

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FILED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Saul Truck Repair 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:

Doyle Saul  
Name of Person

Saul Truck Repair LLC  
Firm/Company

2452 NE 200th Ave  
Address

Williston, FL 32696  
City/State and Zip Code

Saul Trucking & Consulting, Inc.  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dawn Saul at (352) 528-7685  
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 814  
Tallahassee, FL 32303

2021 JUN -14 A 8:45

FILED

Already paid

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

Saul Truck Repair, 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 Jan 18, 2019 and assigned  
Florida document number L19000020947

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>
Ambr	Blake Montgomery-Sal	2321 SE 145th Ave.	<input type="checkbox"/> Add
		Winston, FL 32661	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Ambr	Dawn Sal	16390 NE 55th St	<input type="checkbox"/> Add
		Williston, FL 32656	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change


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[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.

June 1<sup>ST</sup> 2021

  
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Doyle C. Saul  
Typed or printed name of sender

Typed or printed name of signee

(b) The 90th day after the