L19000058272

(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
(Orty/Otale/Liph Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
·
Special Instructions to Filing Officer:

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LLC N/C Amena

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A. RAMSEY AUG 2 5 2023

COVER LETTER

TO: Registration Se Division of Cor		•	•
AAAA TR	UCKING SERVICES LLC		· ` ^
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	AISEL FERNANDEZ GO	NZALEZ	
		Name of Person	
	AAAA TRUCKING SERV	VICES LLC	
		Firm/Company	
	281 23RD ST SW		
	·	Name of Person VICES LLC Firm/Company Address City/State and Zip Code COM (to be used for future annual report notification)	
	NAPLES, FL 34117		
	ALONSO5586@YAHOO.C	COM	Herring
For further information c	oncerning this matter, please ea	-	incativity
AISEL FERNANDEZ G	ONZALEZ		
Name o	f Person		ne Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
<u>Mailing Addres</u> Registration S			ection
Division of C		•	
P.O. Box 6327		The Centre of T	Fallabassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2023 AUG -7 PM 12 37

AAAA TRUCKING SERVICES 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	y were filed on 02/28/2019	and assigned
Florida document number 1.19000058272		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
4A HAULING SERVICE LLC		
The new name must be distinguishable and contain the words "Limited Liab	oility 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 agent and/or the new registered office address here:	address on our records, enter (the name of the new registered
Name of New Registered Agent:	· · · · ·	
New Registered Office Address:		
New Registered Viller reduces.	Enter Florida street address	· ·
	Flo	rida
	City	rida
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
that the same the man the man is a second of the same that		the second second second second

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 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
			□Add
			□Remove
			□ Change
			□Add
			Remove
			□Change
			□Add
			Remove
			□Change
			🗆 Add
			□Remove
			□Change
	•		□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			Channa

D. 11 amen	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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_	
E. Effective	date, if other than the date of filing:
<u>Note:</u> If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the Us effective date on the Department of State's records.
f the record : ecord is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	August 3. 2013
	Signature of a member of authorized representative of a member
	AISEL FERNANDEZ GONZALEZ
	Typed of printed name of signee

Filing Fee: \$25.00