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COVER LETTER

TO: **Registration Section**

Division of Corporations

J Mesa Logistics LLC

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SUBJECT: _____

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Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for tiling.

Р

Please return all correspo	ndence concerning this matter	to the following:		
	Jose Mesa			
		Name of Person		
	J Mesa Logistics LLC			
		Firm/Company		
	15594 128th PL			
		Address		
	Live Oak FL 32060			
	jmesatransport@yahoo.com	City/State and Zip Code		
	E-mail address: (to be used for future annual report notif	ication)	<u></u>
For further information co	oncerning this matter, please ca	all:		2021
Jose Mesa		786 525-9331		
Name of	f Person	at () Area Code Daytime	Telephone Number	יוו שיביע עיבי
Enclosed is a check for th	e following amount:			
■ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop (additional copy)	Fee. f Status & py

<u>Mailing Address:</u> 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

J Mesa Logistics LLC			
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on ted Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Compa Florida document number	any were filed on	06, 2019	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited l	iability company here:		
The new name must be distinguishable and contain the words "Limited L			previation "L.L.C."
Enter new principal offices address, if applicable:	15594 128th PL Liv	e Oak FL 32060	
(Principal office address MUST BE A STREET ADDRESS	2		
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BOX)</u>			1207 2014
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ce address on our reco	rds. <u>enter the name</u>	
Name of New Registered Agent:			\sim
New Registered Office Address:	Enter Florida .	street address	£
	City	, Florida	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 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

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<u>Title</u>	Name	Address	Type of Action
MGR	Darlon Mesa	15594 128th PL Live Oak FL 32060	🗆 Add
			E Remove
			Change
AMBR	Yuleidys Ulloa	15594 128th PL Live Oak FL 32060	🗆 Add
		··	Remove
		······	Change
		·	□Add
			🗆 Remove
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			⊡Change
			🗆 Add
			🗆 Remove
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			🗆 Add
			🗆 Remove
			□Change

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

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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.

April 05	2021
Dated	··································
Ø	
	Signature of a member or authorized representative of a member
Jose Mesa	Jose Mesa
	Typed or printed name of signee

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