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(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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### FLORIDA DEPARTMENT OF STATE Division of Corporations

uno 25, 2021

June 25, 2021

RANDY EUGENE 3800 DUNDEE RD. WINTER HAVEN, FL 33884

SUBJECT: GRINDTIME TRUCK AND TRANSPORTATION LLC

Ref. Number: L19000085912

We have received your document for GRINDTIME TRUCK AND TRANSPORTATION 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L14000063102.

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.

Alecia Rivers Regulatory Specialist II

Letter Number: 421A00014500

## **COVER LETTER**

TO: Registration Division of C	Section Corporations		
SUBJECT:	Grindtime	Truk and Transfortation, LLC Name of Limited Liability Company	
	~	Name of Limited Liability Company	
The enclosed Articles	of Amendment an	d fee(s) are submitted for filing.	
Please return all corre	spondence concern	ing this matter to the following:	
		Candy Eugene Name of Person	-
		Grindtime Truck and Transportation,	يدر
		3800 Dunder Rd, Linterhuen, Fl 33884.	-
		Winkr haven 1F1 33884 City/State and Zip Code	-
	<u></u>	dispate he gitruck and trans. com E-mail address: (to be used for future annual report notification)	
For further informatic	on concerning this i	natter, please call:	
Randy E	Mer? ne of Person	at (44) 676 6195  Area Code Daytime Telephone Number	<del></del>
Enclosed is a check for	or the following am	ount:	
□ \$25.00 Filing Fee		ate of Status Certified Copy Certifica (additional copy is enclosed) Certified	ite of Status &
<u>Mailing Add</u> Registratio		Street Address: Registration Section	
Division o	f Corporations	Division of Corporations	
P.O. Box 6	5327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Company were filed on 03/24/2019	and assigned
Florida document number <u>L170000 8591 Z</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
GT Truck and Transportation, LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	7021
B. If amending the registered agent and/or registered office address on our records, <u>enter the na</u> agent and/or the new registered office address here:	ame of the new register
agent and/of the new registered office address here.	04
Name of New Registered Agent:	
	<u> </u>
New Registered Office Address:  Enter Florida street address	<del></del>
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 Changing Registered Agent, Signature of New Registered Agent

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ffect	ive date if other than the date of filing:  (optional)
lote:	ive date, if other than the date of filing:
recor Lis ti	rd 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 led.
ated	
accu	
	Signature of a member or authorized representative of a member