Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

	Fax Number : (850)617-6383		
From	1:		
	Account Name : LEGALZOOM.COM	INC.	
	Account Number : I20010000062 Phone : (323)962-8600		
	Fax Number : (323)962-3889		2020
Ente	er the email address for this busine annual report mailings. Enter only o	ss entity to be used for one email address please	futur 12.
	Email Address:		— <u>ე</u>
	Email Address: LLC AMND/RESTATE/CORRE MAX F.G. TRANSPOR		2
	LLC AMND/RESTATE/CORRE		<u>2</u>
	LLC AMND/RESTATE/CORRE MAX F.G. TRANSPOR	RTATION LLC	<u>2</u>
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Electronic Filing Menu

Corporate Filing Menu

Help KER AUG 25 2020



June 29, 2020

CHEYENNE MOSELEY 101 N BRAND BLVD 11TH FL GLENDALE, CA 91203

SUBJECT: MAX F.G. TRANSPORTATION LLC

Ref. Number: L19000109389

We have received your document for MAX F.G. TRANSPORTATION LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

The fee to file a Limited Liability Company Amendment is \$25.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Letter Number: 420A00012811

Querida R Moore Regulatory Specialist II

www.sunbiz.org

TO:

COVER LETTER

	ation Sec 1 of Corp	ction porations			
MA	X F.G.	TRANSPORTATION LLC			
SUBJECT:	Name of Limited Liability Company				
The enclosed Art	icles of /	Amendment and fee(s) are sub	mitted for filing.		
Picase return all c	correspoi	ndence concerning this matter	to the following:		
		Cheyenne Moseley			
			Name of Person		•
		Legalzoom.com, Inc.			
			Firm/Company		_
		101 N Brand Blvd 11th Fl			
			Address	.=	-
		Glendale, CA 91203			
		hashan khill 5 livale sa ann	City/State and Zip Code		_
		jacobgrubb615@yalino.com	o be used for future annual rep	sort notification)	
For further inform	nation co	ncerning this matter, please ca	-		
Cheyenne Mosel	ey		800 773-0		
	Name of	Person	Area Code	Daytime Telephone Number	7
Unalozad iz a aba	ale far th	e following amount:			
S25.00 Filing		S30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	te of Status &
	Registra Division P.O. Bo	NG ADDRESS: ation Section t of Corporations x 6327 see, FL 32314	Registration Division of Clifton Buil	Corporations	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAX F.G. TRANSPORTATION LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number <u>L19000109389</u>	ompany were filed on 04/22/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
Willard's Junction LLC		
The new name must be distinguishable and contain the words "Linu	ted Liability Company," the designation "LLC" or the	ie abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR.	ESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<i>₹</i>
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	tered office address on our records, <u>er</u> ess here:	ter ffe name of the
Name of New Registered Agent:		2: 2
		E
New Registered Office Address:	EnterFloridastreetuddress	
	, Florida	1
	City	ZipCode

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

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR =	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			Change
			
			□ Remove
			□ Change
			
			□ Remove
			☐ Change
			_ □ Add
			□ Remove
			☐ Change
			□ Remove
			☐ Change
			_ _ _ _ \dd
			Remove
			☐ Change

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D. II am	ending any othe	er information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	
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(lfan e	ffective date is listed	er than the date of filing:	not be prior to date of filing or more than 90 days after filing a Pur	rsuant to 605.0207 (3)(5
Note	: If the date insert	ted in this block does not meet the on the Department of State.	the applicable statutory filing requirements, this date will	not be listed as the
If the re (b) Th	ecord specifies e 90th day afte	a delayed effective date er the record is filed.	, but not an effective time, at 12:01 a.m. on	the earlier of:
Dated	Aug	13 01 2	<u>2020</u> .	
	Sac	COD FINISHER	ber or authorized representative of a member	<u> </u>
	Jacob F. Gri	uah		
		Type	ed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00