K19000173291

(Re	questor's Name)
(Ad	dress)	
,	,	
(Ad	ldress)	
(Cit	y/State/Zip/Phor	ne #)
PICK-UP		MAIL
	_	_
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	Certificate	se of Status
Octanica Copies	_ Certificate	S Of Status
Special Instructions to	Filing Officer:	
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		1911
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2021 AUG 20 PH 1: 55 SECRETARY OF STATE

Office Use Only

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August 7, 2021

GINA DIAZ 4039 LA PURISIMA DR LAS CRUCES, NM 88011

SUBJECT: KEEP ME GROUNDED TRUCKING LIMITED LIABILITY COMPANY

Ref. Number: L19000173291

We have received your document for KEEP ME GROUNDED TRUCKING LIMITED LIABILITY COMPANY and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6842.

Deborah Bruce Corporate Records Supervisor II Letter Number: 921A00018736

COVER LETTER

Div	ision of Corp	oorations					
SUBJECT:	Keep Me Gi	ounded Trucking LLC		•.			
SODJEC1.		Name of Lin	nited Liability Company				
The enclosed	Articles of a	Amendment and fee(s) are sub	omitted for filing.				
Please return	all correspoi	ndence concerning this matter	to the following:				
		Gina Diaz					
			Name of Person				
			Firm/Company				
		4039 La Purisima Dr					
		-	Address	<u> </u>			
		Las Cruces, NM 88011					
		ginadiaz37@yahoo.com	City/State and Zip Code				
For further in	iformation co	E-mail address: (ncerning this matter, please or	to be used for future annual re	port notification)		2021 F	
Rayne Diaz I		meering this matter, prease of	407 456-4	4947	LAHA	2021 AUG 20	
-	Name of	Person	at () Area Code	Daytime Telephor	ne Number	P# :	
Enclosed is a	check for the	e following amount:				: 55	
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose		\$60.00 Filing Fee Certificate of Str Certified Copy (additional copy is e	atus &	

Registration Section

TO:

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 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Keep Me Grounded Trucking LLC					
(Name of the Lim	ited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited I	Liability Company	were filed on July 3,2019	a	ınd ass	igned
lorida document number <u>L190017</u>	3291				
his amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited liab	oility company here:			
he new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designation "LLC" or t	the abbrevia	tion "L.	L.C."
Enter new principal offices address, if appli	icable:				
Principal office address MUST BE A STRE	ET ADDRESS)				_
inter new mailing address, if applicable:		4039 La Purisima Dr			
Mailing address MAY BE A POST OFFICE	(BOX)	Las Cruces NM 88011			
 If amending the registered agent and/or gent and/or the new registered office addr 		address on our records, enter the	name of t		v registe
	<u> </u>		25. 23.S	2021	
Name of New Registered Agent:	Rayne Diaz Ba	acz	Fig.	2021 AUG	
New Registered Office Address:	5615 Hamlin (Close RD	H.S.	20	(71 mg
		Enter Florida street address	25 E	Щd	. [3]
	Davenport	, Florid	a 33896		フ
		City	Ziq	Gode	

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.

1.110

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
MGR	Gina Diaz	4039 La Purisima Dr	= Add
		Las Cruces NM 88011	□Remove
			□Change
			🗀 Add
			🗆 Remove
			□Change
			□Add
			□Remove
		TALE L	□Change 022 A □ □Add 4 □
		AHASS E	20 Premove
			— Change
			□Add
			□Remove
			Change
			🗆 Add

_____ □Remove

need my LLC to match my	I.D. Please change owners nam	e to Rayne Diaz Baez. I a	m also adding my m	anager to
my LLC.				
				
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			(7) <u></u>	2021
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ective date, if other than the effective date is listed, the date mu	ist be specific and cannot be prior to	date of filing or more than 9	(optional) Odays after filing.) Purs	suant to 605.02
te: If the date inserted in this but the continuation in the factive date on the factive date.	lock does not meet the applicat	ole statutory filing require	ments, this date will	not be listed
cord specifies a delayed effective filed.	ve date, but not an effective tim	e, at 12:01 a.m. on the ear	lier of: (b) The 90t	h day after th
July 23	2021			
α	\	•		

Typed or printed name of signee