

L19000211179

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : TRUCKING PERMITS AND MORE LLC
Account Number : I20140000047
Phone : (813)774-4726
Fax Number : (813)877-2186

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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DIVISION OF CORPORATIONS
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CASTARTRUCK LLC**

Certificate of Status	0
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Page Count	05
Estimated Charge	\$25.00

OCT 21 2021

A. LUNT

2021 OCT 20 PM 12:29

STATE OF FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CASTARTRUCK LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

CARLOS A ALONSO GARCIA

Name of Person

CASTARTRUCK LLC

Firm/Company

11145 PHYLIS AVE

Address

BROOKSVILLE, FL 34614

City/State and Zip Code

castartruck@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARLOS A. ALONSO GARCIA

813 3643938

at ()
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

CASTARTRUCK 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 were filed on 08/26/2019 and assigned
Florida document number L19000211179

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CA STAR TRUCK LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC," or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

11145 PHYLLIS AVE, BROOKSVILLE, FL 34614

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

11145 PHYLLIS AVE, BROOKSVILLE, FL 34614

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

11145 PHYLLIS AVE.

Enter Florida street address

BROOKSVILLE

City

Florida 34614

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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DIVISION OF CORPORATION
2021 OCT 20 AM 10:17

MGR = Manager
AMBR = Authorized Member

[illegible]

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DIVISION OF CONCORDANCE
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated OCTOBER 18 2021

Signature of a member or authorized representative of a member

CARLOS A. ALONSO GARCIA

Typed or printed name of signee

Filing Fee: \$25.00