

4900023168

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

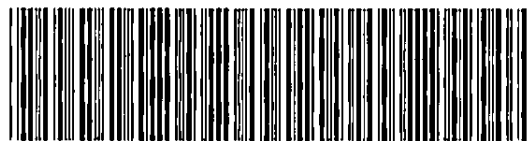
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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06/13/24--01027--001 \*\*25.00

2024 JUN 12 PM 3:45  
CLERK OF STATE  
TALLAHASSEE, FL

CLERK

06/12/24

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GUYTON LOGISTICS 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:

RANDALL GUYTON

\_\_\_\_\_  
Name of Person

GUYTON LOGISTICS LLC

\_\_\_\_\_  
Firm/Company

1776 POLK STREET APT 1406

\_\_\_\_\_  
Address

HOLLYWOOD, FL 33020

\_\_\_\_\_  
City/State and Zip Code

RJGUYTON88@GMAIL.COM

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

RECEIVED  
TALLAHASSEE, FL  
JAN 12 PM 3:45

For further information concerning this matter, please call:

RANDALL GUYTON

305

318-1842

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

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

**If Changing Registered Agent, Signature of New Registered Agent**

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
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 11:41 AM  
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 CANADA

2000 11 12 PM 3:45  
CLERK OF STATE  
TALLAHASSEE, FL

7-D  
JAN 12 PM 3:45  
CLERK OF STATE  
TALLAHASSEE, FL

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.



RANDALL GUYTON

**Filing Fee: \$25.00**