

L19 000260556

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

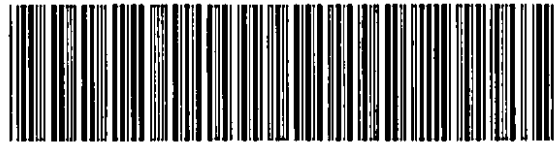
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JUL 14 2020

FILED  
2020 OCT 19 AM 9:21  
FBI - NEW YORK

FILED

OCT 20 2020

S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 10, 2020

ORTLAND C WILLIAMS JR  
150 NE 295 AVENUE  
CROSS CITY, FL 32628

SUBJECT: WILLIAMS FREIGHTLINERS TRUCKING LLC  
Ref. Number: L19000260556

You failed to make the correction(s) requested in our previous letter.

The document must be signed by a member or manager of the limited liability company.

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.

Shelia S Young  
Regulatory Specialist II

Letter Number: 420A00016318

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Williams Freightliners Trucking 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:

Ortland C. Williams Jr.  
Name of Person

150 NE 295 Ave.  
Firm/Company  
Address

Cross City, Fla. 32628  
City/State and Zip Code

natacha.godboldt10@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ortland Williams Jr. at 352 210-3977  
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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Williams Freightliners Trucking LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

2020 OCT 19 AM 9:21  
FILED

The Articles of Organization for this Limited Liability Company were filed on June 30, 2020 and assigned  
Florida document number L19000240996

This amendment is submitted to amend the following:

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

Williams Freightliners Trucking 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:

(Principal office address MUST BE A STREET ADDRESS)

150 NE 295 Ave  
Cross City, Fla. 32628

Enter new mailing address, if applicable:

(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:

Ortland C. Williams Jr.

New Registered Office Address:

150 NE 295 Ave

Enter Florida street address

Cross City

City

Florida

32628

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.

Ortland Williams  
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>
<u>MGR</u>	<u>Ortland Williams Jr.</u>	<u>150 NE 295 Ave.</u>	<input type="checkbox"/> Add
		<u>Cross City, Fla. 32628</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>AMBR</u>	<u>Ortland Williams Jr.</u>	<u>150 NE 295 Ave.</u>	<input type="checkbox"/> Add
		<u>Cross City, Fla. 32628</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
	<u>Natasha Goodbolt</u>	<u>150 NE 295 Ave.</u>	<input type="checkbox"/> Add
		<u>Cross City, Fla. 32628</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

