

L19 000 306807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

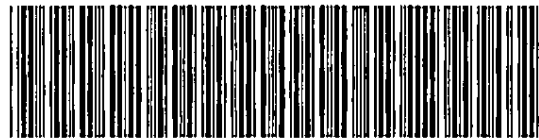
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700358159537

RECEIVED
JAN 1 2021

01/20/21--01030--007 **25.00

FILED
2021 JAN 19 PM 3:47
SECRETARY OF STATE
TALLAHASSEE, FL

45
2/22/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Precision Group 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:

CARL LINDBACK
Name of Person

Firm/Company

149⁷ MAIN ST #108
Address

DUNEDIN FL. 34698
City/State and Zip Code

727MANAGEMENT@GMAIL.COM
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL.

2021 JAN 19 PM 3:47

FILED

For further information concerning this matter, please call:

CARL LINDBACK at (305) 522-2718
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**

Precision Group Trucking 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 12-17-19 and assigned Florida document number L19000306807

This amendment is submitted to amend the following:

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

727 MANAGEMENT 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)

1497 MAIN ST #108
DUNEDIN FL 34698

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1497 MAIN
#108
DUNEDIN FL 34698

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:

1497 MAIN ST #108

Enter Florida street address

DUNEDIN, Florida 34698

City

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

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>
MGR AMBR	Greg Cobb	2244 PINNACLE CIR	<input checked="" type="checkbox"/> Remove
		PALM Harbor FL	<input checked="" type="checkbox"/> Remove
		34685	<input checked="" type="checkbox"/> Change
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
2021 JAN 19 PM 3:47
SECRETARY OF STATE
TALLAHASSEE, FL

FILED
2021 JAN 19 PM 3:47
SECRETARY OF STATE
TALLAHASSEE, FL

FILED
2021 JAN 19 PM 3:47
SECRETARY 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.

Dated 1-8-21

Signature of a member or authorized representative of a member

CARL L. W. D. B. A. C. K.
Typed or printed name of signer