

Jun 16 20, 02:03p

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6/15/2020

Division of Corporations

# Florida Department of State

## Division of Corporations Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H20000180596 3)))



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To:

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

From:

Account Name : THREE K FAST CARRIER SERVICES INC  
Account Number : I20180000033  
Phone : (305)805-3516  
Fax Number : (305)887-5844

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2020 JUN 16 PM 3:59

FILED

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

Email Address:

Cindy Mejia | 16@gmail.com

2020 JUN 16 PM 2:32

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

MEJIAS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

Y. S. ILLIYEE  
JUN 17 2020



June 16, 2020

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

MEJIAS LLC  
1424 NE MIAMI PLACE  
2924  
MIAMI, FL 33132

SUBJECT: MEJIAS LLC  
REF: L20000057320

We have received your document for MEJIAS LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

Please check the appropriate box for CINDY MEJIA

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.

Yaserin Y Sulker  
Regulatory Specialist III

FAX Aud. #: H20000180596  
Letter Number: 420A00011826

*pls see attached  
6/16/20  
1:52 PM*

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Mejias 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 5/28/2020 and assigned  
Florida document number L200000057320

This amendment is submitted to amend the following:

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

None

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)

4404 SW 160<sup>th</sup> Ave #818  
Miramar, FL 33027

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1424 NE Miami Place #2924  
Miami FL 33132

**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:

NA

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**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.*

(Signature)

Andy Mejia

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>
AMBR	CINDY MEJIA	4404 SW 160TH AVE APT 818	<input checked="" type="checkbox"/> Add
		MIRAMAR, FL 33027	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DERLY C. MEJIA LEON	1424 NE MIAMI PL APT 2924	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33132	<input 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"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

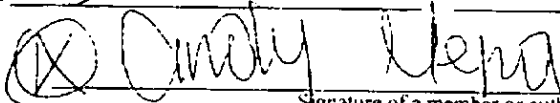
**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*none**E. Effective date, if other than the date of filing:** 5/28/2020 **(optional)**

(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)

**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.

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

5-28-2020

Signature of a member or authorized representative of a member

Cindy Mejia

Typed or printed name of signee