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(Re	equestor's Name)	
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COVER LETTER

TO:	Registration Se Division of Cor			
CUID IE/		Services Corp	•	
SUBJEC	.1:	Name of Lin	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Enrique E Pozuelo Jr		
			Name of Person	 _
		J&Y Truck Services LLC		
			Firm/Company	
		90 W 23 Street Apt #6		2020 JUN 24 PH 3: 23
			Address	2
		Hialeah, FL 33010		To Pa
			City/State and Zip Code	
		enriquepozuelo0402@gma		3: 23 51AF 5RID
			to be used for future annual report notification	
For furth	er information e	oncerning this matter, please c	all:	
Enrique	E Pozuelo Jr		786 616-0227	
	Name o	f Person	Area Code Daytime Teleph	ione Number
Enclosed	is a check for th	ne following amount:		
≘ \$2 5.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S		Street Address:	
	Division of C		Registration Section Division of Corporation	ons
	P.O. Box 632	7	The Centre of Tallaha	ssec
	Tallahassee, I	FL 32314	2415 N. Monroe Stree	et, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J&Y Truck Service Corp		
(Name of the Limited Liability Co (A Florida Lin	ompany as it now appears on our re nited Liability Company)	cords.)
he Articles of Organization for this Limited Liability Comp	pany were filed on _5/28/20	and assigned
lorida document number L20000145714		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	
&Y Truck Service LLC		
he 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:		
<u>Principal office address MUST BE A STREET ADDRES.</u>	<u> </u>	
		2020
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		Z
		2
. If amending the registered agent and/or registered off	fice address on our records, en	iter the name of the new regist
gent and/or the new registered office address here:	· -	23 23 23
		· Lu.
Name of New Registered Agent:		_
N. P. LOW.		
New Registered Office Address:	Enter Florida street ad	ldress
	inner i torrad ju ter du	wi edd
 	City	, Florida
	Cuy	Zıp 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>	Type of Action
			□Remove
			□Change
			C FD Add
			Remove.
			Change-
			□Remove
			Change
			□Add
			□Remove
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	6/17/20			
ective date, if other than the	e date of filing:	filing or more than 90 days after	nal) filing) Por	munt to 605 03
te: If the date inserted in this b	block does not meet the applicable stat	utory filing requirements, this	date will	not be listed
cument's effective date on the I	Department of State's records.			
ecord specifies a delayed effecti	ve date, but not an effective time, at 12	2:01 a m. on the appliance (h)	TL - 00	wh da
s filed.	ve date, but not an effective time, at 12	2.01 a.m. on the carner or, (b)	100 90	an day anter in

June 17		2/7		
	Enrique Pozvelo Signature of a member or authorized rep			

. . . .

Filing Fee: \$25.00