

7/19/22, 1:34 PM

Division of Corporations

# Florida Department of State

## Division of Corporations

### Electronic Filing Cover Sheet

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T. LEMIEUX

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To:

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

From:

Account Name : ULTIMATE TRUCKING SERVICES LLC  
Account Number : 120210000148  
Phone : (813)830-1214  
Fax Number : (813)200-2096

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

Email Address: \_\_\_\_\_

LLC AMND/RESTYTE/CORRECT OR M/MG RESIGN

MICHAELY M.LLC

Certificate of Status	0
Certified Copy	0
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Division of Corporations

Estimated Charge	\$25.00
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**COVER LETTER**

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**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Michaely ML, 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:

Gemma Duarte  
Name of Person  
Ultimate Trucking Services LLC  
Firm/Company  
1008 Coconut Dr  
Address  
Tampa, FL 33619  
City/State and Zip Code  
gduarteuts@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gemma Duarte at ( 813 ) 830-1214  
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

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Michaely ML 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 June 26, 2021 and assigned Florida document number L20000148428.

This amendment is submitted to amend the following:

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

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)

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:

Liana Zamora

New Registered Office Address:

11632 Linden Dr

*Enter Florida street address*

Spring Hill

*City*

Florida

34608

*Zip Code*

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STATE OF FLORIDA  
TALLAHASSEE

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.*

DocuSigned by:

Liana Zamora

127036770374002  
If Changing Registered Agent, Signature of New Registered Agent

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If appointing authorized person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Michaely Mesa Lopez	11632 Linden Rd	<input type="checkbox"/> Add
		Spring Hill, Fl. 34608	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Liana Zamora	11632 Linden Rd	<input checked="" type="checkbox"/> Add
		Spring Hill, FL 34608	<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

