L20000148793

(Re	questor's Name)	
(Ad	dress)	
(Ada	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

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JM121

COVER LETTER

FO: Registration Section Division of Corporations	•
SUBJECT: COUPTNEYS TO Name of L	Eucking LLC.
The enclosed Articles of Amendment and fec(s) are s	submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Craig	Name of Person
_ Courtre	EYS Trucking LLC Firm/Company
1358 (NEST 29th Street
Riviera	Beach Florda 33404
vamonafabl	City/State and Zip Code Say A Com ss: (to be used for future annual report notification)
For further information concerning this matter, pleas	
CYAIA DIXON Name of Person	at (56) 56/707-14/6 or 56/54/6/43 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
☐ \$25.00 Filing Fee	S55.00 Filing Fee & S60.00 Filing Fee. Certified Copy (additional copy is enclosed) 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

FILED

Courtney's	Tructina	LLC	2021 JAN 21 P	M 6: 19
(Name of the Limited (A	Liability Company (Florida Limited Liab	is it now appears on o	UF records CRETARY O	- F STATE EE, FL
The Articles of Organization for this Limited Liab			7	assigned
Florida document number <u>LADDDO14</u>	8793			
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of the	ne limited liability	company here:		
he new name must be distinguishable and contain the word	ds "Limited Liability (Company," the designa	tion "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applicab	le: _			
Principal office address MUST BE A STREET.	<u>ADDRESS)</u>	_ -		
	_	<u>_</u>		
Enter new mailing address, if applicable:				···
<u>Mailing address MAY BE A POST OFFICE BO</u>	<u>)X)</u> _			
	_			
3. If amending the registered agent and/or reg	istered office add nere:	ress on our record	s, enter the name of the	new registered
Name of New Registered Agent:	Craig	Dixon		
New Registered Office Address:		Enter Florida stre	eet address	
			, Florida	
•		City	Zip Co	de

iew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions 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 sing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability impany 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>	Address	Type of Action
Registeren Agent	Craig Dixon	1358 West 29th freet Riviera Bach F1 33404	
	-	Riviera Bach F1 33404	<i>V</i> □Remove
			DCHange
MCR	Ramona-folds	1358 West 29th Street	□Add
		RIVIERA BEACH F1 33/10/	□Remove
			Defiange
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

_	I Craig Dixon was the original
	Registered Agent, So I want to go back
	on as registered agent (per all other documents
	are in my name. The Bank, SAID I need to
	I Craig Dixin was the original Registered Agent. So I want to go back on as registered agent (per all other documents are in my name. The Bank said I need to Stay as registered agent.
	· · · · · · · · · · · · · · · · · · ·
	To also Multina Panagua Kadi as as a anagana
	I am putting Kamona Fish's as a manager.
	
	
 -	
ective d	late, if other than the date of filing: (optional)
effective te: If th	late, if other than the date of filing:
cord spe s filed.	exifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ed	1-04 2021
	Signature of a phember or authorized representative of a member (A, C, D, 140) Typed or printed name of signee
-	Signature of a phember or authorized representative of a member

3.

Filing Fee: \$25.00