## L20000180474

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## COVER LETTER

Tallahassee, FL 32314

	Registration Sec Division of Corp					
SUBJEC		Tractor Services, LLC				
		Name of Lim	ited Liability Company			
		<i>;</i> .				
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please reti	urn all correspo	ndence concerning this matter	to the following:			
		S. Brandon Lee Morris				
			Name of Person	<u>,  ,  ,  ,  ,  ,  ,  ,  ,  ,  ,  ,  ,  </u>		
		Next Level Tractor Service	es, LLC			
			Firm/Company	1 202		
		5561 SW Markel Street				
			Address			
		Palm City, FL 34990				
			City/State and Zip Code	; · · ·		
		nextleveltractor@usa.com		3.		
		E-mail address: (	to be used for future annual report	notification)		
For furthe	r information co	oncerning this matter, please ca	all:			
S. Brando	n Lee Morris	रिद्धः ,	772 233-240	3		
			at ()			
	Name of	Person	Area Code Da	ytime Telephone Number		
Enclosed i	is a check for th	e 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)		
F D	Mailing Address Registration S Division of Co	ection orporations		<del>_</del>		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Next Level Tractor Services, 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 I Florida document number L20000180474	Liability Comp	any were filed on June 26, 2020 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited	liability company here:
N/A		
The new name must be distinguishable and contain the	words "Limited L	iability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		N/A
(Principal office address MUST BE A STRE		5)
Enter new mailing address, if applicable:		N/A
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or agent and/or the new registered office address.		ice address on our records, enter the name of the new registered
Name of New Registered Agent:	N/A	
New Registered Office Address:	N/A	
		Enter Florida street address
	N/A	, Florida N/A
	<u></u>	City Zip Code

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:

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address CORT 20 77	8: 57 Type of Action
MGR	S. Brandon Lee Morris	5561 SW Markel Street	■Add
		Palm City, FL 34990	□ <b>D</b>
			□Change
MGR	Brianne J. Morris	5561 SW Markel Street	
		Palm City, FL 34990	🗀 Remove
			□Change
			🗀 Remove
		·	□Change
			□Add
		<del></del>	□Remove
			Change
	<del></del>	·	□Add
			□ Remove
			□Change
			□Add
			🗆 Remove

	I. I am making the change to add B			-20		0 = -
managing member with 50% ow	nership.			· 41	HII	8: 57
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	06/26/2020					
tive date, if other than the da	te of filing:specific and cannot be prior to date of (	iling or more than 00 d	(option	al)		405 (
	does not meet the applicable statu					
nent's effective date on the Depa	rtment of State's records.					
	ate, but not an effective time, at 12:	01 a.m. on the earlie	er of: (b)	The 9	0th d	ay after
īled.						
August 01	2020					
	A)	_				
		esentative of a member				