## L20 000 252903

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		





100352408851

2020 SEP 24 PH 12: 29

D. RRUCE NOV 01 1020

## **COVER LETTER**

TO: Registration Sec Division of Corp				
SUBJECT:	& C ELITE	TRUCKING	- 	
	Name of Lim	ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	JUSTIN 18 C	MAROIS Name of Person  EUTE TRUC Firm/Company	KINL	
	5339 PLA	NTATION HOME	WAY	
	DORT ORA  STINA  E-mail address: (	City/State and Zip Code  OARDIS @ GMAIL. ( to be used for future annual report noti		
For further information co	oncerning this matter, please c	all:		
JUSTIN Mane of	JAROIS Person	at (386) 214 - Area Code Daytim	- 700 9 FIRST P24	10 A
Enclosed is a check for th	e following amount:		% PH 1	ر د. 2220ء کیبین
□ \$25.00 Filing Fee	\$\times \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing: Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address	۲۰	Street Address:		

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

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

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our record- liability Company)	<u>v.</u> )
The Articles of Organization for this Limited Liability Company Florida document number <a href="https://example.com/limited-liability-company-com/limited-liability-company-com/limited-liability-company-com/limited-liability-company-com/limited-liability-company-com/limited-liability-company-com/limited-liability-company-com/limited-liability-company-com/limited-liability-company-com/limited-liability-company-com/limited-liability-company-com/limited-liability-company-com/limited-liability-company-com/limited-liability-com/liability-com/limited-liability-com/liabili&lt;/th&gt;&lt;th&gt;were filed on 08/17/20&lt;/th&gt;&lt;th&gt; and assigned&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;This amendment is submitted to amend the following:&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;A. If amending name, enter the new name of the limited liab&lt;/th&gt;&lt;th&gt;ility company here:&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;The new name must be distinguishable and contain the words " liabi<="" limited="" td=""><td>lity Company," the designation "LLC</td><td>" or the abbreviation "L.L.C."</td></a>	lity 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)		2020
		SE SE
		21
Enter new mailing address, if applicable:	,	
Mailing address MAY BE A POST OFFICE BOX)		こので
		122
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	'a
	, Florida	
	City	Zip Code

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

THE REPORT OF TRACE INC. LEC

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>	Name	Address	Type of Action
MGR	JUSTIN MAROIS	5339 PLANTATION	XAdd
		1-lome way	□Remove
		PORT ORANGE, FL 3212	<u>₿</u> □Change
AMBR	CANDICE MAROIS	5339 PLANTATION	
		I-bME WAY	□Remove
		PORT ORANGE, FL 3212	8 AChange
			□Add
			□Remove
			ZaChange
		ABA	- P 22 3
			2020Changes   PH 1232   PH
			: ℃ :: ௴ Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change

O. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
WHEN THE LC WAS FILLED, IT WAS
FILLED IMPROPERLY BY SUNBIZ. THE LLC
NEEDS TO BE FILLED AS STATED, JUSTIM MAROIS
AS THE MANAGER AND CANDICE MAROIS
AS AN AUTHORIZED MEMBER. ALLORDING
TO THE ARTICLES FILLED CANDICE MAROIS WAS TITLE
AS THE 'AP'. WHEN THE LLC WAS
•
CREATED THE PROPER TITLES WERE CHOOSEN,
SO I DON'T UNDERSTAND HOW THIS WAS
CHANGED. THELLC CANNOT BE PROPERLY
SET UP WITH A BUSINESS ALCOUNT UNTIL
THIS ISSUE IS RESOLUED. THANK PIOG
i di G
E. Effective date, if other than the date of filing:  (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.
f 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 ecord is filed.
Dated SEPTEMBER 18. 2020.
Signature of a member or authorized representative of a member  OSTIN MARDIS  Typed or printed name of signee