Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OF	27718 17 AMH: 23
J. Had	nado Tru	cking, LLC
(Name of the Limited Liability C (A Florida Lin		our records.)
The Articles of Organization for this Limited Liability Com	OS	12. 12.20
Florida document number <u>4200027</u>	pany were filed on	3 / 2020 and assigned
	1550	
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 designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u>(S)</u>	
Enter new mailing address if applicable		
Enter new mailing address, if applicable:		-
(Mailing address MAY BE A POST OFFICE BOX)	 	
B. If amending the registered agent and/or registered off	fice address on our record	s, enter the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	eet address
	Ends 1 iorida sir	
	City	, Florida Zip 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.

3052201440

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
AMBR	Jorge Machaelo	11611 NW 57th CT	□Add
		Hialeah, Fl 33012	□Remove
			Change
AMBR	Julissa Hachado	11611 NW 57th CT Hialeah, Fl 3301	🗆 Add
		Hialeah Fl 3301	<u>2</u> □Remove
			DChange
			🗆 Add
			□Remove
			□ Change
			🗆 Add
			□Remove
			□Change
			🗆 🗚 dd
			□Remove
			Change
			□Add
			Remove
			□ Change

If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ive date, if other than the date of filing: (optional) fective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
ne reco ord is f	rd 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 led.
Dated	,,,
	Signature of a member or authorized representative of a member
	Jorge Hachado. Typed or printed name of signee
	Typed or printed name of signee

Filing Fee: \$25.00