

L20000366998

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

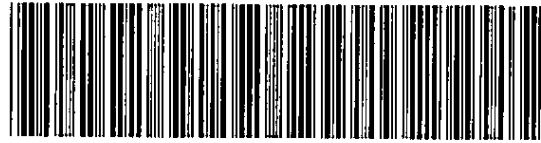
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

US
10/11/21

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: NINE-NINE TRUCKING "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:

NEDJEEN BAPTISTE

Name of Person

START-UP BUSINESS CONSULTING

Firm/Company

5700 LAKE WORTH RD SUITE 201-L

Address

GREENACRES FL 33463

City/State and Zip Code

NEDJEEN.BAPTISTE@GMAIL.COM

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL

For further information concerning this matter, please call:

NEDJEEN BAPTISTE

561 376-4794

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Neveen Zuhair
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>	<u>Address</u>	<u>Type of Action</u>
MGR	DUMERJEAN, JIMMY	3411 10TH ST SW	<input checked="" type="checkbox"/> Add
		LEHIGH ACRES, FL 33976	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
OWNER	DUMERJEAN, JIMMY	3411 10TH ST SW	<input type="checkbox"/> Add
		LEHIGH ACRES, FL 33976	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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SECRETARY OF STATE
TALLAHASSEE, FL
2021 OCT -14 PM 2:04
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2020 OCT -4 PM 2: 04
SECRETARY OF STATE
TALLAHASSEE FL

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2020 OCT -4 PM 2:04
SECRETARY OF STATE
TULSA, OKLA. SEE FL

(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)

If 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 record is filed.

Dated SEPTEMBER 30TH 2021

Signature of a member or authorized representative of a member

DUMERJEAN, JIMMY

Typed or printed name of signee

Filing Fee: \$25.00