

K21 0000009326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

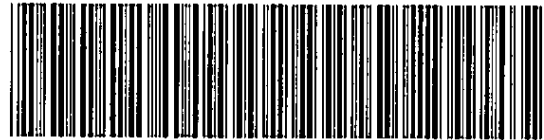
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J.C.  
08/04/21



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# El Roi Logistics, LLC.

350 W Carroll St Ste 201 Kissimmee, FL 34741 Tel. 407-201-3012 Email: elroidispatch2@gmail.com

July 14, 2021

Florida Department of State  
Division of Corporation  
Amendment Department  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern,

Please remit any document to our office address.

Sincerely,

Saymara N. Munoz

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CLTM ELECTRICAL & MORE 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:

Luis A. Mendez Vazquez

Name of Person

N/A

Firm/Company

318 Marival Dr

Address

Davenport, FL 33837

City/State and Zip Code

elroidispatch2@gmail.com

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

For further information concerning this matter, please call:

Luis A. Mendez Vazquez

Name of Person

at ( 787 ) 9461014  
Area Code Daytime Telephone Number

Enclosed is a check for the 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)

**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**

CLTM ELECTRICAL & MORE 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 Liability Company were filed on 12/30/2020 and assigned  
Florida document number L21000009326

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 designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

318 Marival Dr.

**(Principal office address MUST BE A STREET ADDRESS)**

Davenport, FL 33837

Enter new mailing address, if applicable:

318 Marival Dr.

**(Mailing address MAY BE A POST OFFICE BOX)**

Davenport, FL 33837

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

El Roi Logistics, LLC.

New Registered Office Address:

350 W. Carroll St. Ste 201

Enter Florida street address

Kissimmee

City

Florida 34741

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.*

  
**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>
AMBR	Veronica Mendez Gonzalez	3513 Whimsical Cir.	<input type="checkbox"/> Add
		Rockledge, FL 32955	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Luis A. Mendez Vazquez	318 Marival Dr.	<input checked="" type="checkbox"/> Add
		Davenport, FL 33837	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Ingrid Rios Malave	318 Marival Dr.	<input checked="" type="checkbox"/> Add
		Davenport, FL 33837	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

4/11/24

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19 A  
 pursuant to 605.0207 (3)(b)  
 will not be listed as the

**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.

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.

2021

Signature of a member or authorized representative of \_\_\_\_\_

**Luis A. Mendez Vazquez**

Typed or printed name of signee

**Filing Fee: \$25.00**