

h21 0000 51396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

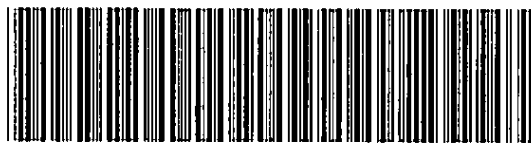
(Document Number)

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

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21 JUL -9 PM 12: 14



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
2021 JUL -9 AM 9:40  
SARASOTA  
FL

June 4, 2021

AKAKI KOBALIA  
3700 BENEVA RD #604  
SARASOTA, FL 34232

SUBJECT: AKO TRUCKING LLC  
Ref. Number: L21000051396

We have received your document for AKO TRUCKING LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORP, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tekayla T Matthews  
OPS

Letter Number: 221A00012235

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: AKO 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:

Akaki Kobalia  
Name of Person

AKO TRUCKING LLC  
Firm/Company

3700 Beneva Rd. # 604  
Address

Sarasota FL 34232  
City/State and Zip Code

Akokobalia777@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Akaki Kobalia at (239) 834-5644  
Name of Person 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

21 JUL -9 PM 12: 15

AKO TRUCKING 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 January 28, 2021 and assigned Florida document number L21000051396.

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

*Enter Florida street address*

*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.*

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

Title                      Name                      Address                      21 JUL -9 PH12:15                      Type of Action

AMBR      Akaki Kobalia

3700 Beneva Rd #604                       Add

Sarasota FL 34232                       Remove

\_\_\_\_\_                       Change

\_\_\_\_\_                       Add

\_\_\_\_\_                       Remove

\_\_\_\_\_                       Change

\_\_\_\_\_                       Add

\_\_\_\_\_                       Remove

\_\_\_\_\_                       Change

\_\_\_\_\_                       Add

\_\_\_\_\_                       Remove

\_\_\_\_\_                       Change

\_\_\_\_\_                       Add

\_\_\_\_\_                       Remove

\_\_\_\_\_                       Change

\_\_\_\_\_                       Add

\_\_\_\_\_                       Remove

Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

21 JUL -9 PM 12:15

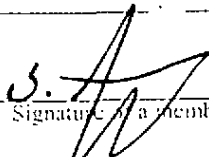
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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.

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 6/22/21



Signature of a member or authorized representative of a member

Akaki Kobalia

Typed or printed name of signer