

h21 0000 51396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

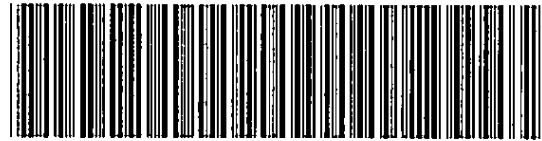
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

7/13/2021
TM

Office Use Only



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04/19/21--01016--023 **52.50

21 JUL -9 PM 12:14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2021 JUL -9 AM 9:40

RECEIVED
TALLAHASSEE
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:

- | | | | |
|---|--|--|--|
| <input 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

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 "LLC."

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

AMBR Akaki Kobalia 3700 Beneva Rd. #604 Add

Year	Number of people (millions)
1996	24.5
2000	24.0
2004	23.5
2008	23.0
2012	22.5
2016	21.5

□ Change

_____ ☐ Add

☐ Remove

_____ ☐ Change

_____ ☐ Add

 Remove

Year	Change (Millions)
1990	10
1991	25
1992	20
1993	25
1994	30
1995	35
1996	40
1997	45
1998	50
1999	60
2000	85

_____ ☐ Add

☐ Remove

Change

_____ ☐ Add

[Remove](#)

_____ ☐ Change

☐ Add

[Remove](#)

00000000

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