

5/3/2021

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Notes: Please print (this page and use) as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LAXMY'S CARRIER SERVICES
Account Number : 120040000007
Phone : (305)640-0291
Fax Number : (305)489-2902

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: LAXMYCZOO1@yahoo.com

RECEIVED

2021 MAY -4 AM 8:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
M & M MACIA TRUCKING LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

MAY - 5 2021

M. SOLOMON

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M & M MACIA TRUCKING LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

YOANY MACIA

Name of Person

M & M MACIA TRUCKING LLC

Firm/Company

6815 SW 25TH ST

Address

MIAMI, FL 33155

City, State and Zip Code

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

For further information concerning this matter, please call:

LAXMY CHACON

305 640-0281

Name of Person

Area Code

Daytime Telephone Number

Enclosure 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

2021 MAY -4 AM 10:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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>
AMBR	YOANY GARCIA	6818 SW 25TH ST	☐ Add
		MIAMI, FL 33155	☐ Remove
			☒ Change
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 MAY -4 AM 10:25

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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.

Signature of a member or authorized representative of a member

AMIBR

Typed or printed name of signer

Filing Fee: \$25.00