

(((H21000122833 3)))

(shown below) on the top and bottom of all pages of the document.



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

: TRUCKING PERMITS AND MORE LLC Account Name

Account Number : I20140000047 : (813)774-4726 : (813)877-2186 Fax Number

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

Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **RDV TRANSPORTATION LLC**

Certificate of Status	0
Certified Copy	()
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

To: 18506176383

Tallahassee, FL 32303

COVER LETTER

TO: Registration Sec Division of Corp			
	SPORTATION LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
	HIPOLITO DUBOY, YUD		
		Name of Person	
	RDV TRANSPORTATIO	N LLC	
		Firm/Company	
	6410 AMBASSADOR DR		
		Address	
	TAMPA, FL 33615		
	_	City/State and Zip Code	
	yudiel1978@gmail.com	to be used for future annual report no	tification)
For further information of	oncerning this matter, please of		
HIPOLITO DUBOY, Y	UDIEL.	813 4076887 at ()	
Name o	of Person	Area Code Daytii	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Fiting Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of C P.O. Box 633	Section Corporations	Street Address: Registration S Division of Co The Centre of	orporations
Tallahassee,		2415 N. Monr	roe Street, Suite 810

To: 18506176383

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RDV TRANSPORTATION LLC			
(Name of the Limited Liability Compa (A Florida Lunited	invas it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Company Florida document number 1.21000113338	were filed on 03/08/	2021	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the desig	nation "LLC" or the abbr	reviation "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 agent and/or the new registered office address here: Name of New Registered Agent:	address on our reco	ords, enter the name	of the new registere
		E)	- の / - <u>-</u> 例
New Registered Office Address:	Enter Florida	street address	も
	City	i i	ÆPCode -
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of m s provided for in Ch	y aunes, ana 1 am je apter 605, F.S. Or, j	imutai wan uaw if this document is
II C	sanging Registered Agen	t, Signature of New Reg	istered 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

To: 18506176383

<u>Title</u>	Name	Address	Type of Action
AMBR	HIPOLITO DUBOY, YUDIEL	6410 AMBASSADOR DR	□Add
		TAMPA, FL 33615	□Remove
			∑ Change
			🗆 Add
			□Remove
			□Change
			□ Add
			□Remove
			Change
			🗀 Add
			□Remove
			\ \ \ \ \ \ _
			□Remove
			☐ Change
			🗆 Add
			Remove
			□Change

To: 18506176383

	<u> </u>			.	<u> </u>
					_
					
				<u> </u>	
					
		<u> </u>			
			•		
	- ·- ·- · · · · · · · · · · · · · · · ·				
					<u></u>
			· · · · · · · · · · · · · · · · · · ·		
					
Tective	date, if other than the date	of filing:		(optional)	
	date, if other than the date we date is listed, the date must be spline date inserted in this block did	and the enter common by prior to do	te of tiling or more than statutory filing requi	i 90 days after filing.) Pur rements, this date will	not be listed as
ote: It t	is effective date on the Departr	nent of State's records			
ocument					
		, but not an effective time,	at 12:01 a.m. on the	earlier of: (b) The 90	th day after the
	pecifies a delayed effective date				
record sp	necities a delayed effective date				
record sp		2021			
	MARCH 26	2021			
record sp Lis filed	MARCH 26	·			
record sp Lis filed	MARCH 26	·	I representative of a m	ember	
record sp Lis filed	MARCH 26	2021 2021 2021 Dolito nure of a member or authorized	d representative of a m	ember	