

L21000144745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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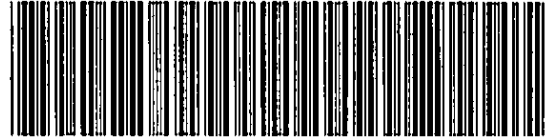
(Business Entity Name)

(Document Number)

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OFFICE OF THE CLERK
STATE OF NEW YORK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TL'S EXPRESS TRUCKING LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

LATORA DESUE

Name of Person

TL'S EXPRESS TRUCKING LLC

Firm/Company

2139 NE 3RD PLACE

Address

GAINESVILLE FLORIDA 32641

City/State and Zip Code

tlxpress2021@gmail.com

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

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RECEIVED
TALLAHASSEE

For further information concerning this matter, please call:

LATORA DESUE

352 519-8892

Name of Person

at ()

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**

TL'S EXPRESS 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 03/29/2021 and assigned Florida document number L21000144745.

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)

2139 NE 3RD PLACE

GAINESVILLE FLORIDA 32641

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2139 NE 3RD PLACE

GAINESVILLE FLORIDA 32641

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:

LATORA DESUE

New Registered Office Address:

2139 NE 3RD PLACE

Enter Florida street address

GAINESVILLE

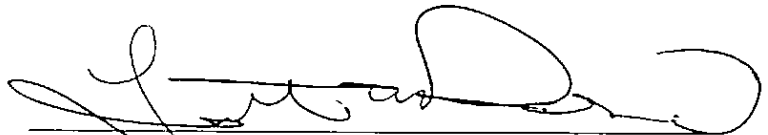
Florida 32641

City

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LATORA DESUE	2139 NE 3RD PLACE	<input checked="" type="checkbox"/> Add
		GAINESVILLE FLORIDA 32641	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ANTONIO DESUE	2139 NE 3RD PLACE	<input type="checkbox"/> Add
		GAINESVILLE FLORIDA 32641	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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CITY OF GAINESVILLE
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2022 DEC 12 14:19:58
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341

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.

Dated DECEMBER 9 2022



Signature of a member or authorized representative of a member

LATORA DESUE

Typed or printed name of signee