L21000146706

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
_
(Business Entity Name)
(Document Number)
Cartifical Carries Cartification of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
', '
ļ
2/22/21/
9/10/41
9/28/21 Tm
[[1,1]]

Office Use Only



700373175117

08/17/21--01032--007 *+25.00

21 SEP 17 PM 12: 11

COVER LETTER

Division of Corp	ocrations		
SUBJECT: In Do	e time trucking	LCC	
	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Alvin Vac		
	Alvin Haye	Name of Person	
	In the lime	Trucking LLC FirmtCompany	
		Firm/Company	
	12103 DAWN	Vista Di	
		Address	
	Dan North Fl.	335 7 x	
	RIVILLE FL	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information co	oncerning this matter, please ca	all:	
Christopher S	colf	0. (305 , 469-632	1
Name of	Person	at (30) 469-632 Area Code Daytime	Telephone Number
Enclosed is a check for the			
☑ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

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

In Die Time Trocking 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 <u>03/30/2021</u> and assigned Florida document number <u>L210014670</u> .
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
. Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 = MS $AMBR = AS$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address 21 SEP 17 PM12: 14	Type of Action
AMBR	Claudette Williams	13915 Roseall Funkn	ØAdd
		RIVERVIEW, FL 33579	□Remove
			□ Change
			🗖 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			🗆 Add
			□Remove
			☐ Change
			□ Add
			□Remove
			□Change

=	21 SEF 17 PH 12: 14
-	(13-
-	
-	
-	
_	
-	
-	
-	
_	
-	
-	
-	
-	
- OC 4	in due if when the due of films
ian efi Note:	ive date, if other than the date of filing:
recoi d is fi	d 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 led.
ated	August 16th 2021
	Signature of a member or authorized representative of a member
	Christopher Scoff
	Markhone Scott

Filing Fee: \$25.00