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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRUCKING PERMITS AND MORE LLC

Account Number : I20140000047 Phone : (813)774-4726

: (813)877-2186 Fax Number

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN L & JAY TRANSPORTATION LLC

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COVER LETTER

Division of Cor L & Jay Tr SUBJECT:	ansportation LLC	•		
<u></u>	Same of Limi	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	CARDENAS, JESUS E			
		Name of Person		
				202
		Firm/Company		2021 MAY -6 PM 4: 47 SEGRETARY OF STATI
				福品
		Address		3000
	GIBSONTON, FL 33534			SEES
		City/State and Zip Code		平三
	E-mail address: (to be used for future annual report notif	ication)	
For further information	concerning this matter, please ca	all:		
MYRIAM VARGAS		\$13 7744726 at ()		
Name (of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for t	he following amount:			
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate o Certified Co (additional cop	f Status & py

MailingAddress:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 StreetAddress:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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company has been notified in writing of this change.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

L & Jay Transportation LLC				
(Name of the Limited Liability Compar (A Florida Limited L	iy as it now appears on our riability Company)	records.)		
The Articles of Organization for this Limited Liability Company vibrida document number L21000158798	were filed on 04/01/2021	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	lity company here:			
		S: 20		
The new name must be distinguishable and contain the words "Limited Liabili	ty 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)		₹ 6 F		
		SSO P		
		E. ST		
Enter new mailing address, if applicable:		FL L		
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered office a- agent and/or the new registered office address here:	ddress on our records, <u>e</u>	enter the name of the new register		
Name of New Registered Agent:				
Name of New Registered Agent.				
New Registered Office Address:	Enter Florida street a	a litrare		
	1 Met 1 for the Street Charless			
	City	Florida Zip Code		
New Designation of Association Community of the series Designation Association (Community Community Commun	Ciù	<i>Σι</i> ρ Co lle		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p				

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

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

Title	Name Address		Type of Action
Title MGR	MEDINA, LILLIAN E	7226 MERLOT SIENNA AVE	
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ctive date, if other than I effective date is listed, the date I	nust be specific an	d cannot be prior to		more than 90 days			
 e: If the date inserted in this inient's effective date on the 			ble statutory fil	ing requirement	s, this date w	ill not be lis	ted
ord specifies a delayed effect	tive date, but no	ot an effective tin	no, at 12:01 a m	on the earlier of	of: (b) The	Xith day aft	er il
filed							
May 6		2021					
Lillian	E Hedina Signature of a	member or author	ized representati	ve of a member			