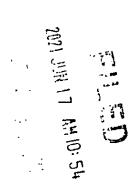
# L21000185710

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
<del></del>	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:

Office Use Only



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JUN 18 2021 I ALBRITTON WILLIN 17 AMIT 2

## Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 6/17/2021			**WALK IN*
ENTITY NAME SHELB	O TRUCKING LLC		
DOCUMENT NUMBER_	· <del>_</del> ·		
DOCO. 12.11	**PLEASE FILE THE	ATTACHED AND RETURN**	
xxxx	Plain Copy		
	Certified Copy Certificate of Status		
**/	PLEASE OBTAIN THE FOL	LOWING FOR THE ABOVE ENTITY**	
	Certified Copy of Arts & Certificate of Good Stand		
		TARIAL CERTIFICATION**	
COUNTRY OF DESTINAT NUMBER OF CERTIFICA			
TOTAL OWED \$25.00		ACCOUNT #: I2016000007	
Please call Tina at ti	he above number for an	ny issues or concerns. Thank you s	o mach!

### **COVER LETTER**

TO:

TO: Registration Se Division of Cor			
	RUCKING LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	BIELBO TRUCKING LLC  Name of Limited Liability Company  et enclosed Articles of Amendment and fee(s) are submitted for filing.  assertum all correspondence concerning this matter to the following:    Megan Fuentes		
Please return all correspo	indence concerning this matter	to the following:	
	Megan Fuentes		
		Name of Person	
	ZenBusiness Inc		
		Firm/Company	<del></del>
	5511 Parkcrest Dr Suite 20	7	
		Address	
	Austin, Texas, 78731		
		City/State and Zip Code	
	- ·		difference (
For further information c			(III.Carion)
Megan Fuentes			
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee		Certified Copy	Certificate of Status &
Mailing Addres Registration S		Street Address: Registration S	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	
Tallahassee,	rL 32314	2415 N. Mont	oe Street, Suite 810

Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

T	0			
ARTICLES OF C	ORGANIZATION			
0	F			
SHELBO TRUCKING LLC	and it was appears on our records )			
(Name of the Limited Liability Compa (A Florida Limited	ORGANIZATION  In y as it now appears on our records.)  Ciability Company)			
man and a control of the state of the little Community	were filed on 04/21/2021 and assigned			
The Articles of Organization for this Limited Liability Company	were filed on and assigned			
Florida document number L21000185770				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
A. If amending frame, enter the new maine of the minted had	mity company nere.			
The new name must be distinguishable and contain the words "Limited Liabi	hity Company "the designation "LLC" or the abbreviation "L.L.C."			
	2295 South Hiawassee Road			
Enter new principal offices address, if applicable:	*			
(Principal office address MUST BE A STREET ADDRESS)	Suite 104			
	Orlando, Fl. 32835			
Enter new mailing address, if applicable:	2295 South Hiawassee Road			
(Mailing address MAY BE A POST OFFICE BOX)	Suite 104			
	Orlando, FL 32835			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>			
Name of New Registered Agent:				
New Registered Office Address:				
New Registered Office Address.	Enter Florida street address			
	, Florida			
<del></del>	City Zip Code			
New Registered Agent's Signature, if changing Registered Agent;				
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is			

If Changing Registered Agent, Signature of New Registered Agent

If antending 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>	Address	Type of Action
AMBR	Sheldon N Mills	2295 South Hiawassee Road	
		Suite 104	□Remove
		Orlando, FL 32835	<b>3</b> 01
			□Add
			Remove
		<del></del>	Change
		<del></del>	
			□Remove
			□Change
<del> </del>			□Add
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_						
ective date, if other than the a effective date is listed, the date muster. If the date inserted in this bloom	date of filing:	t be prior to dat	of filing or mor	(opti	onal) r filing.) Pursuant to	5 605,0207 Historikas
rument's effective date on the De	epartment of State's	records.	talutory ming	requirements, an	s date will not be	nsted as
cord specifies a delayed effective s filed.	e date, but not an eff	fective time, a	t 12:01 a.m. or	i the earlier of: ({	o) The 90th day	after the
ed June 16		<u> </u>				
/s/ Sheldon N Mills	Signature of a membe					_

Filing Fee: \$25.00