To: 18506176383

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H210002051793)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: TRUCKING PERMITS AND MORE LLC Account Name

Account Number : I20140000047

Phone

: (813)774-4726

Fax Number

: (813)877-2186

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MORALES TRANSPORT LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

To: 18506176383

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2021-05-21 20:50·51 UTC

18132001059

From: Trucking Permits And More LLC

COVER LETTER

TO: Registration Sec Division of Corp		
	TRANSPORT LLC	
SUBJECT:	Name of Limited Liability Company	ber
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.	
Please return all correspon	ndence concerning this matter to the following:	
	GUERRA, MAYELIN	
	Name of Person	
	MORALES TRANSPORT LLC	
	Firm/Company	
	7916 W ELM ST	
	Address	
	TAMPA, FL 33614	
	City/State and Zip Code	
	yoel.morales1973@yahoo.com E-mail address: (to be used for future annual report notification)	
For further information c	oncerning this matter, please call:	
GUERRA, MAYELIN	813 4620735 at () Area Code Daytime Telephone Number	
Name o	f Person Area Code Daytime Telephone Number	
Enclosed is a check for t	he following amount:	
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status	us &

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee To: 18506176383

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MORALES TRANSPORT LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our red Liability Company)	cords.)
The Articles of Organization for this Limited Liability Compare Florida document number 1.21000231818 This amendment is submitted to amend the following:	ny were filed on 05/18/2021	and assigned
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Lic	ability 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)		D ₁₁
		2021 MA)
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		10 To
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	ce address on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		11
	Enter Florida street a	
	City	Florida
New Registered Agent's Signature, if changing Registered Age	•	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and completaccept the obligations of my position as registered agent a being filed to merely reflect a change in the registered off company has been notified in writing of this change.	igree to act in this capacity. ete performance of my dutic is provided for in Chapter (is, and I am familiar with and 605, F.S. Or, if this document is
IFC	hanging Registered Agent, Signa	sture 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:

18132001059

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	GUERRA, MAYELIN	7916 W ELM ST	□ Add
		TAMPA, Fl. 33615	□Remove
			■Change
MGR	MORALES, NATHALI	7916 W ELM ST	□Add
		TAMPA, FL 33615	□Remove
			≘ Change
MGR	MORALES ANGEL, YOEL	2909 W IDLEWILD AVE	■Add
		TAMPA. FL 33615	Remove
			Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			Remove
			□Change
			□Add
			□Remove
			□Change
			Remove

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D. If amer	ding any other infor	mation, enter change(s) here: (Atta	المام مامد	i i i analintaasi			
D. II dille		mation, enter change(s) here: (And	ien aaau	ional sneets	s, if necessary.j		
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E. Effectiv	e date, if other than	the date of filing:	of filing or	more than 90.	(optional)	irenani to 60°	(1207 /33/6)
Note: 1	I the date inserted in thi	is block does not meet the applicable sta	dutory fili	ng requirem	ients, this date wi	il not be list	ed as the
досине	nt's effective date on th	e Department of State's records.					
If the record	specifies a delayed offe	ctive date, but not an effective time, at	: 12:01 a m	on the earl	icrof: (b) The 9	Oth day afte	r the
record is file			:			,	
	<u>~</u> 3 ~	2021	1				
Dated	5 -00	2041	•				
		Oligal.	,				
		Signature of a member or authorized re	presentati	ve of a member	er		
	GUERRA, MAYEI	j N	; ;				
		Typed or printed name	ofsignee				
			-				

Filing Fee: \$25.00