L21000255097

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
		<u>.</u>





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CAPITAL CONNECTION, INC.

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DAY 23 TRUCKING LLC	
	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by: SETH	UCC 1 or 3 File
	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

TO: Registration Section Division of Corporation	15		
SUBJECT:	23 TA Name of Limite	COCKING LLC ed Liability Company	<u>/-</u>
The enclosed Articles of Amenda	nent and fee(s) are subm	itted for filing.	
Please return all correspondence	concerning this matter to	the following:	
DF	LYRON R &	SASTON RAMIRE Name of Person	Z
-4	JAY 23	TRUCKING CL	<u>_C.</u>
7	470 NW	1/2 PC Address	
	MEDLE	City/State and Zip Code GASTON & GMAI be used for future annual report notification	1. can
	E-mail address: (v		od)
For further information concerning	ng this matter, please car	ıı:	
OAYRON 61 Name of Person	15/ON	at (786) 447 3 Area Code Daytime Tel	ephone Number
Enclosed is a check for the follow	wing amount:		
	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/COURIER ADDRESS:

Registration Section Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Con (A Florida Limit	mpany as it now appears on our records.) ted Liability Company)
The Articles of Organization for this Limited Liability Comp.	any were filed on 06/01/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
The new pame must be distinguishable and/contain the words "Limited I	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 ADDRES.) Enter new mailing address, if applicable:	3 Medley, FL 33/780 3 2470 NW 112 pl
(Mailing address MAY BE A POST OFFICE BOX)	Medley + 33/78 = 00
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our records, enter the name of the new s here:
Name of New Registered Agent:	N/A
New Registered Office Address: 747	Enter Florida stylet address
Ne	City Florida 33/78 Zip Code
New Registered Agent's Signature, if changing Registered A	gent:

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the

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 = Ma $AMBR = Au$	anager athorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	ORYNON R GASTON BANNINEZ		Add
			Remove
			☐ Change
AMBR	DAYRON R GASTON PAMILEZ		Add
	<i>y</i>		□ Remove
			Change
			Change 202 Add Remove
			—————————————————————————————————————
			☐ Remove
			☐ Change
			Add
			□ Remove
			Change
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Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and o	annot be prior to date of	filing or more than 90 days	optional) s after filing.) Pursuant to 6	05.0207 (
Note: If the date inserted in this block does not me document's effective date on the Department of Sta		utory ming requirement	s, this date will not be if	sted as t
the record specifies a delayed effective da) The 90th day after the record is filed.	te, but not an ef	fective time, at 12:	01 a.m. on the ear	lier of:
Dated August 6,	<u> 2021</u>			
Signature of a m	Manusa ember or authorized res	presentative of a member		
DAYRON R. E	ASTON Typed or printed name	Raminay.		

Page 3 of 3

Filing Fee: \$25.00