## 421000260155

| (Reques                                 | stor's Name)           |
|---|------------------------|
|   |                        |
| (Addres                                 | <u> </u>               |
| (· 133135                               | <u>-,</u>              |
|   |                        |
| (Addres                                 | s)                     |
|   |                        |
| (City/Sta                               | te/Zip/Phone #)        |
| (On). Ou                                | resizioni none my      |
| PICK-UP                                 | <br>                   |
| ☐ FICK-OF                               | ∐ WAIT ☐ MAIL          |
|   |                        |
| (Busines                                | ss Entity Name)        |
| (230                                    | o Lindy Halliey        |
|   |                        |
| (Docum                                  | ent Number)            |
|   |                        |
| Certified Copies                        | Certificates of Status |
|   | Serimodices of Otalias |
|   |                        |
| Special Instructions to Filing Officer: |                        |
|   |                        |
|   |                        |
|   |                        |
|   |                        |
|   |                        |
|   | 01510                  |
|   | 8/5/21                 |
|   | 1                      |
|   |                        |
| Ö                                       | fice Use Only          |



200370079682

07/19/21--01012--027 \*\*25.00

21 JUL 19 AH 8: 59

## **COVER LETTER**

TO:

| TO: Registration Section<br>Division of Corpora                                       |   |
|---|---|
| SUBJECT TAUE  | Truck IIC   |
| SUBJECT: JAUE   | Name of Limited Liability Company   |
|   |   |
| The enclosed Articles of Ame  | pdment and fee(s) are submitted for filing.   |
| Please return all correctionder   | ce concerning this matter to the following:   |
| rouse return an corresponder  | l l l l l l l l l l l l l l l l l l l   |
|   | Tessica A. Angel Name of Person   |
|   | Name of Person  |
|   |   |
| -   | JAUE Truck LLC Firm/Company   |
|   | T tritle company  |
|   | 8003 NW 61 ST   |
| <del>-</del>  | Address   |
|   | 7777  |
| _   | Tamarac F1 33321. City/State and Zip Code   |
| _   |   |
|   | Legandra - 2233 @ Hatmail report notification)  |
| For further information conce   |   |
| To runtilly indefinition collection   | ming this matter, please cair.  |
| 16=51Ca   | A. Angel. at (954) 6555716  Area Code Daytime Telephone Number  |
| Name of Pers  | on Area Code Daytime Telephone Number   |
|   |   |
| Enclosed is a check for the fol   | <br> bwing amount:<br>  |
| ☐ \$25.00 Filing Fee  | \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed) |
| Mailing Address: Registration Secti Division of Corpo P.O. Box 6327 Tallahassee, FL 3 | Division of Corporations The Centre of Tallahassee  |
| randidoco, i io o   | Tallahassee, FL 32303   |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

21 JUL 19 AH 8: 59 Ave Truck IIC (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 OG OY 2021 and assigned Florida document number | L 21000760155 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 "L.L.C." 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: Jessica A Name of New Registered Agent: New Registered Office Address: Tarrect City, Florida 33321

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.

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 = Manager HAIRTON IN CHELLINGS. AMBR = Authorized Member 21 JUL 19 AH 8: 59 Title Name **Type of Action Address** 8003 NW 6157 TOWNCIPOR 35311 MADE Jessica A. Argel \_\_\_\_\_ □Remove \_\_\_\_\_ □Change \_\_\_\_\_ □Remove \_\_\_\_\_ □ Add \_\_\_\_\_ Change □ Remove \_\_\_\_\_ □Change \_\_\_\_\_\_ Remove

| 1   |
|---|
|   |
|   |
| D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)   |
| This changes were requested by the financial institution to open an account   |
|   |
| please change registered agents name  |
| as shown in my driver license.  |
| Also piecise abange authorized personiss  |
| TITLE name addiess  |
| MGR. Jessica A. Angel 8003 nu GI ST Tamara  |
| TL 3337   |
| 2 2   |
|   |
| 19 21   |
|   |
|   |
| <u> </u>  |
|   |
|   |
|   |
|   |
| E. Effective date, if other than the date of filing:(optional)  |
| (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 \( \)b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the |
| document's effective date on the Department of State's records.   |
| If the record 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  |
| record is filed.  |
| Dated 07/14/2021  |
| na  |
| Signature of a member or authorized representative of a member  |
|   |
| Typed or printed name of signee   |
| /* * * · · · · · · · · · · · · · · · · ·  |





Department of State / Division of Corporations / Search Records / Search by Document Number /

Florida Limited Liabitity Company

JAVE TRUCKS LLC

Filling Information

**Document Number** 

L21000260155

FEI/EIN Number

87-1313065

**Date Filed** 

06/04/2021

Effective Date

06/05/2021

State

FL

Status

**ACTIVE** 

Principal Address

8003 NW 61 STREET

TAMARAC, FL 33321

Malling Address

8003 NW 61 STREET

TAMARAC, FL 33321

Registered Agent Name & Address - Jessica A

ANGEL, ALEJANDRA

8003 NW 61 STREET

TAMARAC, FL 33321

Authorized Person(s) Detail

NONE

Annual Reports

No Annual Reports Filed

Document Images

06/04/2021 - Florida Limited List@tx

View Image in PDF format

+itle: Mgrm = MEngging member

