

L21000264781

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

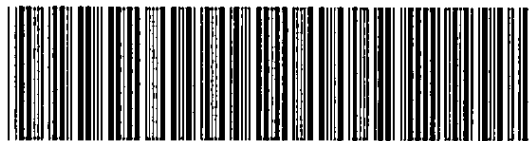
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21 JUL 15 PM 1:50

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CARTY TRUCKING & LOGISTICS LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JEMUEL S CARTY
Name of Person

Firm/Company

1849 CAYMAN COVE CIR.
Address

SAINT CLOUD, FL, 34772
City/State and Zip Code

CARTYTRUCKINGLLC@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEMUEL CARTY at (407) 773-4723
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee

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

21 JUL 15 PM 1:50

CARTY TRUCKING & LOGISTICS LLC

(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 06/07/2021 and assigned Florida document number L21000264781.

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 "LLC" 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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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.

[illegible]

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

AMENDING AUTHORIZED PERSONS TITLE

21 JUL 15 PM 1:50

CARTY, JEMUEL S MGR → PRESIDENT

CREWS, SAMANTHA L MGR → PRESIDENT

WE NEED TO CHANGE TITLES FROM "MGR" TO "PRESIDENT"
WELLS FARGO WILL NOT ALLOW US TO USE ALL FUNCTIONS
OF OUR BUSINESS ACCOUNT WITHOUT UPDATING OUR TITLE.

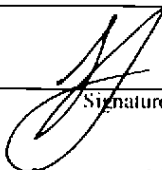
E. Effective date, if other than the date of filing: _____ (optional)

(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 7/13/21



Signature of a member or authorized representative of a member

JEMUEL CARTY

Typed or printed name of signee

Filing Fee: \$25.00