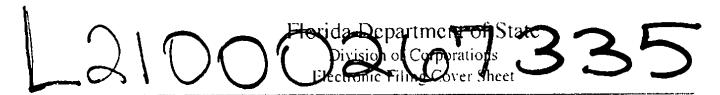
Page: 2 of 6



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000272849 3)))



H210002728493ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRUCKING PERMITS AND MORE LLC

Account Number: I20140000047 Phone : (813)774-4726 Fax Number : (813)877-2186

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CONSTRUCTION TAMPA LLC

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

Electronic Filing Menu Corporate Filing Menu

Help



## COVER LETTER

Name of Person

			COVERTEI
	TQ:	Registration Section Division of Corporations	
		CONSTRUCTION TAI	MPA LLC
_	SUBJE	CT:	
•			Name of Limited Liability Company
	The enc	losed Articles of Amendment	and fee(s) are submitted for filing.
	Please r	eturn all correspondence conc	erning this matter to the following:

Page: 3 of 6

	RANDDY, SR
	Firm/Company
334 FC	UNTAIN AVE
<del></del>	Address
<b>AMPA</b>	FL33615
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
ting th	s matter, please call:

For further information concer-

FRANDY	LEON
--------	------

813 2963850

Nume of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

□ \$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 Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

If Changing Registered Agent, Signature of New Registered Agent

## From: Trucking Permits And More

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UCTION TAMPA LLC				
(Name of the Limite	ed Lighility Compar (A Florida Limited L	iy as it now appe lability Company)	urs on our records.	)
tation for this Limited Lin L21000267335 per	ability Company	were filed on _	y9/21	and assigned
mitted to amend the follo	owing:			
, enter the new name of	the limited liabi	lity company	here:	
inguishable and contain the w	ords "Limited Liabil	ity Company," the	designation "LLC"	or the abbreviation "L.L.C."
ffices address, if applica	able:			
dress, if applicable:				
	BOX)			
gistered agent and/or r registered office addres	registered office : ss here:	address on our	records, <u>enter t</u>	he name of the new registered
v Registered Agent:				
red Office Address:		Enter f	lorida street address	
			, Flo	rida
	· · · · · · · · · · · · · · · · · · ·	City		Zip Code
utes relative to the prop is of my position as regi reflect a change in the	er and complete istered agent as registered office	perjormance provided for it	oj my auties, un n Chanter 605. l	F.S. Or, if this document is
	(Name of the Limited Line 1.21000267335)  mitted to amend the folker, enter the new name of inguishable and contain the worffices address, if applied as MUST BE A STREE and dress, if applied as MUST BE A STREE and dress, if applied as MUST BE A STREE and dress, if applicable:  We be a POST OFFICE and a segistered agent and for registered office address.  We registered Agent:  The Address:  Signature, if changing appointment as registered as a segistered as a	(Name of the Limited Liability Company (A Florida Liability (A Florida Lia	(Name of the Limited Liability Company as it now apper (A Florida Limited Liability Company)  reation for this Limited Liability Company were filed on	(Name of the Limited Liability Company at it now appears on our records.  (A Florida Limited Liability Company)  action for this Limited Liability Company were filed on 1.21000267335  ber

MGR = N AMBR = A	Annager Authorized Member			
<u>Title</u>	<u>Name</u>		Address	Tour
AMBR	LEON, FRANDUY, SR		8334 FOUNTAIN AVE	Type of Action
				DAdd
			TAMPA FL 33615	
				Remove
				—————————————————————————————————————
				LJAidd
		_		LJAdd
				□Remove
				Change
<del></del> _		<del></del>		
				□Remove
				; 
<del></del>		_		——— □Add
				□Remove
	•			<u> </u>
				□Change
<del></del>		-	<u> </u>	□Add
				,
	ļ		· · · · · · · · · · · · · · · · · · ·	□ Remove
				Change
<del></del>		-		CAda

To: 18596176884

If amending any other informati	ion, enter change(s) here: (Attach additional s.	heets, if necessary.)
		11
		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
		0. I
_		
	<del></del>	
Effective date, if other than the (if an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the I	e date of filing:  st be specific and cannot be prior to date of filing or more; lock does not meet the applicable statutory filing re department of State's records.	(optional) than 90 days after filing.) Pursuant to 605.0207 (equirements, this date will not be listed as t
the record specifies a delayed effecti cord is filed.	ve date, but not an effective time, at 12:01 a.m. on t	the earlier of: (b) The 90th day after the
JULY 15	2021	
Dated	·	
S. O. James	Signature of a member or authorized representative of	
The state of the s		a memoer
LEON, FRANDDY, S		
<del></del>	Typed or printed name of signee	