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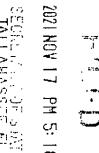
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
10/25 NO\$
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Office Use Only



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November 2, 2021

THOMAS GARRETT KING 16200 OLD US 41 FORT MYERS, FL 33912

SUBJECT: TKING TRUCKING LLC Ref. Number: L21000350069

We have received your document for TKING TRUCKING LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6842.

Deborah Bruce
Corporate Records Supervisor II
Letter Number: 421A00026727

Number: 421A00026777

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: K	na Trucking	2021 COT 25	; 74 g:	<u>(</u> 9		
оовист. <u>га ц</u>	Name of Limi	it d Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:				
		Name of Person Truck Firm/Company				
	16200 012					
	fort myers	Florida City/State and Zip Code	33917			
		830 yahoo to be used for future annua			202 s e /	
For further information c	oncerning this matter, please co	all:		VILL A	VON I	12.7
Thomas Name o	King	at (234) Area Code	691-8113 Daytime Telepho	one Number	2021 NOV 17 PH 5: 1	The second of th
Enclosed is a check for th	ne following amount:			لن	6	
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is er		\$60,00 Filing I Certificate of Certified Copy (additional copy i	Status &	
Mailing Addres Registration 5 Division of C	Section	Regist	Address: ration Section on of Corporation	nns		
P.O. Box 632			entre of Tallaha			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

11.

ning ruch		
(Name of the Limited I	Jability Company as it now appears on our records.) Florida Elmited Liability Company)	
The Articles of Organization for this Limited Liabi Florida document number 2310003.55001		and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
		
B. If amending the registered agent and/or regis		
agent and/or the new registered office address h	ere:	NOV I
Name of New Registered Agent:		S21 P 14
New Registered Office Address:		
	Enter Florida street address	<u> </u>
-	, Florid	aZip 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.

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 AMBR = Authorized Member **Address** Type of Action Title Title Name 16200 old us 41 fort payers FL DAdd Thomas □Remove _____ ZChange Kyle Kirt 7761 Buckingham Rd DAdd Fort myers FL 33905 | Remove □Remove □Change □ Remove ☐ Change □Remove

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ocume	ent's effective	date on the	Department	of State's reco	ds.	,			
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