

K21 0000363682

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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FILED
2022 MAY 16 PM 6:56
SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER
JUN 17 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WATKINS HAULING & TRUCKING

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:

WINSTON L. WATKINS

Name of Person

Firm/Company

605 GARFIELD AVE

Address

LEHIGH ACRES FL 33936

City/State and Zip Code

WINSTONWATKINS8@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WINSTON L. WATKINS

305 240-7006

at ()

Name 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

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

FILED

WATKINS HAULING & TRUCKING, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2022 MAY 16 PM 6:56

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 08/12/2021 and assigned
Florida document number L21000363682.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

VIRGINIA'S TRUCKING & HAULING LLC

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)

605 GARFIELD AVE

LEHIGH ACRES, FLORIDA 339636

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: WINSTON L. WATKINS

New Registered Office Address: 605 GARFIELD AVE

Enter Florida street address

LEHIGH ACRES, Florida 33936

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.



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

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	WINSTON L. WATKINS	605 GARFIELD AVE	<input checked="" type="checkbox"/> Add
		LEHIGH ACRES, FL 33936	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DONNA THOMAS-WATKINS		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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(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)

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.

Winston Watts
Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00



RECEIVED

FLORIDA DEPARTMENT OF STATE
Division of Corporations

2022 MAY 16 PM 2:12
SECRETARY OF STATE
TALLAHASSEE, FL

April 28, 2022

WINSTON L. WATKINS
605 GARFIELD AVE
LEHIGH ACRES, FL 33936

SUBJECT: WATKINS HAULING & TRUCKING, LLC
Ref. Number: L21000363682

We have received your document for WATKINS HAULING & TRUCKING, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 822A00009915