

L21000486730

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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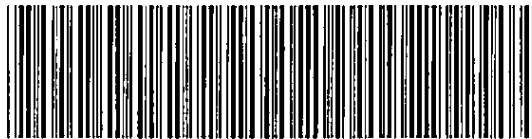
(Business Entity Name)

(Document Number)

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FILE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: KRU RIVERS TRUCKING 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:

ZENA VELIC

Name of Person

ACCOUNTING AT ALL COST INC

Firm/Company

1551 Glengarry Rd

Address

Jacksonville, FL 32207

City/State and Zip Code

accounting@accountingatallcost.com

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

For further information concerning this matter, please call:

zena velic

904
at ()

232-8270

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

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

4 | 27 | 2023

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.

Dated 4-27-2023, _____

Rockney Ruins

BODNEY RIVERS

Typed or printed name of signee

33-211