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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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A. RIVERS

DEC 20 2021



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COVER LETTER

Registration Section Division of Corporations

TO:

TORTUE'S SUBJECT:	TRUCKING LLC		
30bJEC1.	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	WADLEY LOUIS		
	*****	Name of Person	
	TORTUE'S TRUCKING	LLC	
		Firm/Company	
	2000 NW 15TH AVE AP	ГА	
		Address	
	FORT LAUDERDALE FI	., 33311	
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	tortuestruckingllc@gmail.c	oin	
	E-mail address: (to be used for future annual report not	fication)
For further information c	oncerning this matter, please c	all:	
WADLEY LOUIS		305 834-2507	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne 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 Addres Registration S	Section	<u>Street Address:</u> Registration Se	
Division of C	-	Division of Cor	•
P.O. Box 632 Tallahassee, I		The Centre of T 2415 N. Monro	allahassee e Street, Suite 810
		٠٠١٠ ١٩٠ (١١١٠)	uvin walle or

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TORTUE'S TRUCKING LLC

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

(A Florida Limited L	lability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.21000499843	were filed on 11/22/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LI	.C" 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 a agent and/or the new registered office address here:		er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addi 	ress DC C Florida Zipocode
New Registered Agent's Signature, if changing Registered Agent:	·	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, provided for in Chapter 605	further agree to comply with the and I am familias with and 5. F.S. Or, if this document is

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>	Name	Address	Type of Action
AMBR	WADLEY LOUIS	2000 NW 15TH AVE APT A FT LAUDERDALE	= Add
		FL 33311	🗆 Remove
		····	□Change
MGR	NADINE JOSEPH	2000 NW 15TH AVE APT A FT LAUDERDALE	≣ Add
		FL 33311	□Remove
			□Change
			□Add
			П Remove
			Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
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