L22000041102

(Requestor's Name)
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,	Addiessy
(Address)
(City/State/Zip/Phone #)
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PICK-UP	WAIT MAIL
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	Document Number)
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WALK IN

	CERTIFIED COPY		
xx	РНОТОСОРУ	<u> </u>	
	CUS		
xx	FILING	LLC AMEND	·
	CICCIOTRUCKING LLC CORPORATE NAME AND DOCUMENT	#)	
((CORPORATE NAME AND DOCUMENT	#)	
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COVER LETTER

Division of Cor			
	UCKING LLC		
SUBJECT:	Name of Limit	ed Liability Company	
mld Aminlon of	Amendment and fee(s) are subn	nizzed for filing	
	ondence concerning this matter t		
Please return all correspo	ondence concerning this matter t	o me ionowing.	
	EKATERINA KISSELEVA	4	
		Name of Person	
	EGK SOLUTIONS LLC		
		Firm/Company	
	7901 4TH STREET NORT	H, STE 325	
		Address	
	ST. PETERSBURG, FL 33	702	
		City/State and Zip Code	
	INFO@EGKSOLUTIONS.	OM o be used for future annual report notifice	ation)
For further information of	concerning this matter, please ca	-	,
EKATERINA KISSELI		727 488-6937	
_	of Person	at () Area Code Daytime 7	Felenhone Number
wante (or r croon	7.11.00 (0.000)	
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address: Registration Sect	:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

• •

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

CICCIOTRUCKING LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records. Liability Company))
The Articles of Organization for this Limited Liability Company	were filed on 01/21/2022	and assigned
Florida document number L22000041162		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)		S S S
		# A 71
		> 5
Enter new mailing address, if applicable:		OF A H
(Mailing address MAY BE A POST OFFICE BOX)		
		$\overline{\Sigma}$ ω
		rii 🛥
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter (</u>	the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
The Management of the Authority	Enter Florida street address	
		orida
	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>	Address	Type of Action
AMBR	MEROLA ARMANDO	2752 NE 5TH AVE	≣ A đ d
		BOCA RATON, FL 33431	□Remove
			□Change
AMBR	ARMANDO MEROLA	2752 NE 5TH AVE	□Add
		BOCA RATON, FL 33431	■Remove
			□Change
			□ Add
			□Remove
			☐ Change
		□Remove	
			Change
			□Add
			ПRemove
		·	□ Change
			□Add
			🖸 Remove
			□ Change

(If an e	tive date, if other than the date of filing: (optional) flective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
he reco	rd 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 iled.
Dated	02/10/2022
	Signature of a member or authorized representative of a member
	signature of a member of authorized representative of a member
	EKATERINA KISSELEVA

Filing Fee: \$25.00