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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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S. CHATHAM
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DIVISION OF COMPONATIONS

22 JUL -5 PM 3: 95

COVER LETTER

	gistration Se vision of Cor			
SUBJECT:		RUCKS LLC		
		Name of Lin	nited Liability Company	
The enclose	ed Articles of .	Amendment and fee(s) are sub	omitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		GREISY SUAREZ		
			Name of Person	
		DIRECT SOLUTION SEI	RVICES	
			Firm/Company	 _
		1248 Viscaya Pkwy		
			Address	
Cape Coral, Fl. 33990				
			City/State and Zip Code	
		PERMITS@directsolutions	services.com to be used for future annual report no	ditantain
For further i	information co	oncerning this matter, please c	·	(meatton)
GREISY S	UAREZ		239 443-5846	
Name of Person		at () Area Code Daytir	ne Telephone Number	
Enclosed is	a check for th	e 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

ACTION TRUCKS LLC			
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our reco Liability Company)	ords.)	
The Articles of Organization for this Limited Liability Company Florida document number 1.22000066318	were filed on	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation L.L.E.	
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·		
(Principal office address MUST BE A STREET ADDRESS)		-5	
		မှ ႏ	
Enter new mailing address, if applicable:		: 2: 2:	
Mailing address MAY BE A POST OFFICE BOX)	•		
		· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ent</u>	er the name of the new register	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street addi	ress	
	Florida		
	City	FloridaZip Code	
New Registered Agent's Signature, if changing Registered Agent:			
hereby accept the appointment as registered agent and agrovosisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as position filed to marely reflect a change in the registered office.	performance of my duties, provided for in Chapter 603	and I am familiar with and 5, F.S. Or, if this document is	

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>	Type of Action
AMBR	GONZALEZ CUELLO, YUBEL	1217 SW 36TH TER	
		CAPE CORAL, FL 33914	□Remove
		1217 SW 36TH TER	= Change
AMBR	GARCIA, YAQUELIN ALBUERNE	CAPE CORAL. FL 33914	■Add
			
			□Change
			22400 22400 22400
			PRemoves 3
			PA POST
			Remove
			□Change
			□Remove
			□ Change
			□Change

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