L2200431339

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800393308838

99.05.02 (1919:50) **25.00

2022 AUG 25 TAHO: 35

TALLEL CORID

022 AUC OF

ch 8/22/2022

COVER LETTER

Division of Cor	porations				
	TATANKA	TRUCKING LLC			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	JU	AN C FRANCO			
		Name of Person			
		iro			
Firm/Company					
	677) INDIAN CREEK DRIVE 7P			
	Address				
		MIAMI BEACH FLORIDA 331	41		
	JFRAN	City/State and Zip Code CO@TATANKATRUCKING.Co	OM .		
	E-mail address; (to be used for future annual report no	otification)		
For further information of	oncerning this matter, please co	ıll:			
JUAN C FRANCO		402 306-7498			
Name o	f Person	at () Area Code Dayt	ime Telephone Number		
Enclosed is a check for the	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		Street Address: Registration S	Section		
Division of C		Division of C			

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

TO:

Registration Section

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

	TATANKA TRUCKING LLC		2022 AUG 25	Ell in-
(Name of the L	imited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)		7.77 10.
The Articles of Organization for this Limited L22000131339	d Liability Company were filed on 9 	03-16-2022	and assigned	1
This amendment is submitted to amend the f	following:			
A. If amending name, enter the new nam	e of the limited liability company her	ne:		
The new name must be distinguishable and contain the new principal offices address, if apprentice address MUST BE A STR	plicable:	signation "LLC" or the		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFIC	CE BOX)			
B. If amending the registered agent and/o agent and/or the new registered office add		cords, <u>enter the</u> na	me of the new reg	istered
Name of New Registered Agent:				
New Registered Office Address:	Enter Florid	da street address		
		, Florida _		<u>_</u>
	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 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
MGR	DAMIAN RODRIGUEZ CHAVEZ	7227 BAY DR APT 23 MIAMI BEACH, FL 33141	= Add
			= Add
			Remove
			Change
			🗆 Add
			= Remove
			Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
<u> </u>			□Add
			□ Remove
			□Change
			□Add
			□ Remove
			□Change

						.
						<u>. </u>
	·					
					<u> </u>	
						<u>.</u>
					····	
						
		1 5 1 - 5		<u>-</u>	<u> </u>	···
				•		
						
	- · · · · · · · · · · · · · · · · · · ·					
ective date, reffective date	if other than the dat is listed, the date must be	e of filing: specific and cannot b	e prior to date of f	iling or more than 9	(optional) 0 days after filing.)	Pursuant to 605 020
te: If the dat	e inserted in this block	does not meet the a	applicable statut	ory filing require	ments, this date v	vill not be listed a
ument's erre	ctive date on the Depar	iment of State's re	coras.			
and specific	a a daluurad affaatissa da		Alexandres e A 120	01	1'	004 1 0 4
cora specifie s filed.	s a delayed effective da	ie, but not an effec	tive time, at 12:	or a.m. on the ea	riier of: (b) The	90th day after the
	00.05	4				
ed	08-25	2022				
		 '	· · · ·			
	\mathcal{O}	^				
	て ブ	$('\lambda\lambda)$				
	Sign	nature of a member o	r authorized repre	esentative of a mem	ber	