

L22000153039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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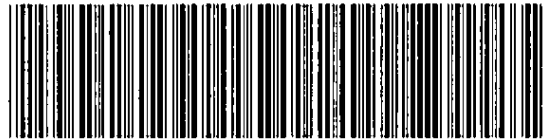
(Business Entity Name)

(Document Number)

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12/28/23

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DATE: 12/28/2023

NAME: ROMAD TRUCKING LLC

TYPE OF FILING: AMENDMENT

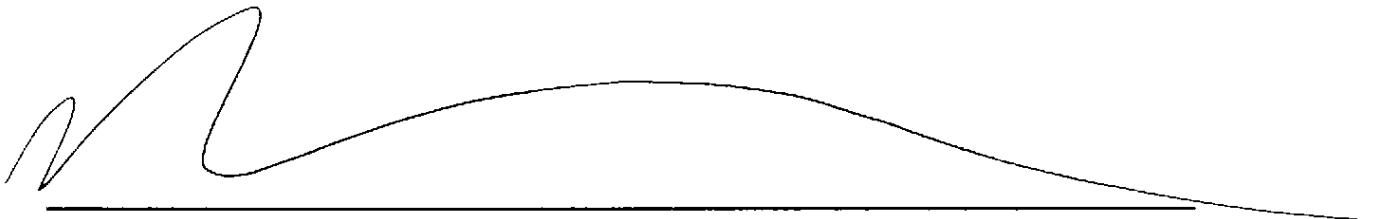
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ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROMAD 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:

ROMULUS HORDOBETIU

Name of Person

Firm/Company

6563 YEDRA AVENUE

Address

FORT PIERCE, FL 34951

City/State and Zip Code

hordobetium@yahoo.com

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

For further information concerning this matter, please call:

ROMULUS HORDOBETIU

772 258-6326
at ()

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

2023 DEC 28 PM 12:40

CLERK OF STATE
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ROMAD TRUCKING LLC

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

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned Florida document number L22000153039.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

2131 HOLLYWOOD BLVD

STE 202

HOLLYWOOD, FL 33020

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2131 HOLLYWOOD BLVD

STE 202

HOLLYWOOD, FL 33020

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida

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>	<u>Address</u>	<u>Type of Action</u>
MGR	ROMULUS HORDOBETIU	6563 YEDRA AVENUE	<input type="checkbox"/> Add
		FORT PIERCE, FL 34951	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	MADALINA HORDOBETIU	6563 YEDRA AVENUE	<input type="checkbox"/> Add
		FORT PIERCE, FL 34951	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	1782764 ALBERTA INC	979 W VILLAGE SQUARE	<input checked="" type="checkbox"/> Add
		LONDON, ON N6H 0J7	<input type="checkbox"/> Remove
		CANADA	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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DIVISION OF CORPORATION
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SECRETARY OF STATE
DIVISION OF COMPARATIONS
2023 DEC 28 PM 12:40

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 DECEMBER 27 2023

ROMULUS HORDOBETIU

Typed or printed name of signee

Filing Fee: \$25.00