

L22000161586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

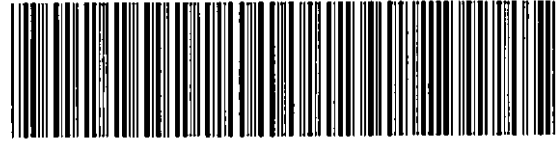
(Business Entity Name)

(Document Number)

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2023 MAR 31 PM 2:33

ALABAMA SECRETARY OF REVENUE

2023 MAR 31 PM 2:45

MAR 31 2023

COVER LETTER

Registration Section
Division of Corporations

SUBJECT: M+Z Trucking, LLC
Name of Limited Liability Company

Enclosed Articles of Amendment and fees are submitted for filing.

I return all correspondence concerning this matter to the following:

Zelda Starks
Name of Person

M+Z Trucking, LLC
Firm Company

1423 SE 1st Terr
Address

Gainesville, FL 32601
City, State and Zip Code

z1n50starks@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Zelda Starks at (352) 494-1281
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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

2023 MAR 31 PM 2:45

M & Z Trucking LLC
(Name of the Limited Liability Company as it ~~now~~ appears on our records.)
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 4-5-22 and assigned
a document number L22000161586

amendment is submitted to amend the following.

Amending name, enter the new name of the limited liability company here:

name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

or new principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS

or new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX

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

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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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.

Signature of New Registered Agent

If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Effective date, if other than the date of filing: _____ (optional)

If an effective 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 (3)(b)

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.

If record 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 document is filed.

Dated 3/31/ 2023

Mark Starks
Signature of a member or authorized representative of a member

MARK STARKS
Typed or printed name of signee