LZZ 000181658

(Re	questor's Name)
(Ad	dress)	
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(Cit	y/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	nme)
(Do	cument Numbe	r)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
		06/07 N0\$
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Office Use Only



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2022 SEP -6 PM 12: 114

SEP - 7 2022 S. PRATHEF



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 22, 2022

WILLIE EVERETT JR P.O. BOX 36 WEBSTER, FL 33597

SUBJECT: EVERETT TRUCKING & LOGISTICS LLC

Ref. Number: W22000108161

We have received your document for EVERETT TRUCKING & LOGISTICS LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Stacy Prather Regulatory Specialist III

2022 SEP -6 PM 1:

Letter Number: 422A00018693

RECEIVED

COVER LETTER

Registration Section TO: **Division of Corporations** SUBJECT: ____

Received 4 2022 JUN-7 AM 8: 05

SECRETARYLOF STATE TALLAHASSEE, FL

WILLIE EVERETT JR 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:

	WILLIE EVERETT JR			
		Name of Person		
	EVERETT TRUCKING &	LOGISTICS LLC		
		Firm/Company		
	PO BOX 36			
		Address		
	WEBSTER FL 33597			
		City/State and Zip Code		 .
	absolutetaxes@gmail.com			
	E-mail address: (1	o be used for future annual r	eport notification)	
For further information c	oncerning this matter, please ca	all:		
Sharnita Jenkins		352 569	-0712	
Name o	f Person	Area Code	Daytime Teleph	one Number
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enci		S60.00 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

1: ,

WILLIE EVERETT JR TRUCKING LLC		Precords.)
(Name of the Limited Liability Co	mpany as it now appears on our ted Liability Company)	records.)
The Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Indiana Liability Comp	·	- 6 - 6
A. If amending name, enter the new name of the limited l	liability company here:	
EVERETT TRUCKING & LOGISTICS LLC		
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	5)	
Enter new mailing address, if applicable:	PO Box 36	
(Mailing address MAY BE A POST OFFICE BOX)	Webster FL 33597	
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	ice address on our records	, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	u aádress
	City	, Flo rida
	Cili	and a second

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
			□Add
			□Remove
			□Change
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fective date, if other than the	e date of filing:			(ontional)	
n effective date is listed, the date mu	ist be specific and canno	ot be prior to date of	tiling or more than 90 da	ys after filing.) P	ursuant to 605,020
vie: If the date inserted in this becument's effective date on the I			nory ming requiremen	ats, this date wi	ii not be listed as
ecord specifies a delayed effecti	ve date, but not an eff	fective time, at 12	:01 a.m. on the earlie	r of: (b) The 9	00th day aftethe
is filed.					22 SE
May 18	202	22			35 P
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* lelillie Willie	3 Event	4 Q.			SEP -6 PHI2: 44

IRS DEPARTMENT OF THE TREASURY INTERMAL REVENUE SERVICE CINCINNATI OH 45999-0023

Date of this notice: 05-18-2022

Employer Identification Number:

88-2370145

Form: SS-4

Number of this notice: CP 575 B

EVERETT TRUCKING & LOGISTICS LLC WILLIE EVERETT JR SOLE MBF. PO BOX 36 WEBSTER, FL 33597

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 88-2370145. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did **not** apply for this EIN, please contact us at the phone number or address listed on the top of this notice.

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

Based on the information received from you or your representative, you must file the following forms by the dates shown.

Your Form 2290 becomes due the month after your vehicle is put into use.

If you have questions about the forms or the due dates shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification (corporation, partnership, estate, trust, EPMF, etc.) based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2020-1, 2020-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election.

See Form 8832 and its instructions for additional information.