

To:

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2024-08-14 06:22:33 UTC-14

18506176383

From: ZenBusiness User

**122002182094**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

H240002714063

Note: Please print this page and use it as a cover sheet. Type the fax audit number  
(shown below) on the top and bottom of all pages of the document.

((H240002714063)))



H240002714063ABC-

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC.  
Account Number : I20230000190  
Phone : (844)449-3624  
Fax Number : (512)597-0678

REC'D  
FLA  
DIVISION OF CORP  
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FLORIDA DIVISION OF CORPORATIONS  
AUGUST 13, 2024  
AM 2:14

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

#### A . F TRUCKING & LOGISTICS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

K. SALY

AUG 14 2024

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Corporate Filing Menu

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To:

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2024-08-14 06:22:33 UTC-14  
**ARTICLES OF AMENDMENT**

18506176383

From: ZenBusiness User

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

H240002714063

A . F TRUCKING & LOGISTICS LLC

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

2024 AUG 13 AM 2:15  
TALLAHASSEE, FLORIDA  
FILED  
SHERIFF'S OFFICE, TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 04/15/2022

Florida document number L22000182094.

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)

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Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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**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

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18506176333

From: ZenBusiness User

11 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>
AMBR	Dorcas Ruth Maligaya Andojar	4355 Corporate Avenue	<input type="checkbox"/> Add
		APT 184	<input checked="" type="checkbox"/> Remove
		Lakeland, FL 33809	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add

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From: ZenBusiness User

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

920A AUG 13 AM 2:15  
RECORDED BY R. B. KELLY

FILED

E. 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 the 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 record is filed.

Dated August 13th 2024

/s/ Felipe Andujar JR

Signature of a member or authorized representative of a member

Felipe Andujar JR

Typed or printed name of signee

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Filing Fee: \$25.00