

L 22 000 200 235

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

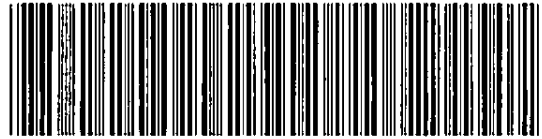
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2011.01.01 12:00:00

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FLORIDA TOPS TRANSPORT 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:

MANDY A. CRUZ  
Name of Person

Firm/Company

P.O BOX 4152  
Address

MOORE HAVEN, FL 33471  
City/State and Zip Code

DDTRSIDE@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MANDY A CRUZ  
Name of Person

at (863)  
Area Code

909-7662  
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

FLORIDA TOPS TRANSPORT LLC

TOPS SERVICE SOLUTIONS LLC

9005 GREEN CIRCLE

LABELLE, FL 33935

P.O BOX 4152

MOORE HAVEN, FL 33471

**, Florida**

**If Changing Registered Agent, Signature of New Registered Agent**

MGR = Manager  
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

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

Business type: Handy man

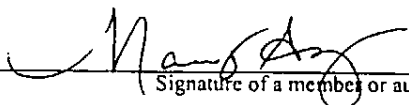
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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 2-26, 2024.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

MANDY A CRUZ  
\_\_\_\_\_  
Typed or printed name of signee