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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

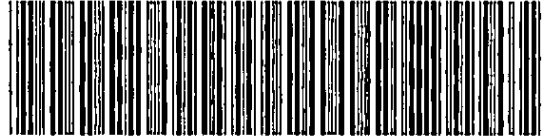
(Business Entity Name)

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TALLAHASSEE, FL

COVER LETTER

TO:  Registration Section
Division of Corporations

SUBJECT: ORLI TRUCKING 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:

JULIANA D SANTOS

Name of Person

UNIVERSAL TAX AND INSURANCE CORP

Firm/Company

440 SOUTH FEDERAL HWY SUITE 104

Address

DEERFIELD BEACH FL 33441

City/State and Zip Code

julianadsuniversal@gmail.com

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

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TALLAHASSEE, FL.

For further information concerning this matter, please call:

JULIANA D SANTOS

954

532-9000

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

ORLI TRUCKING TRANSPORT LLC

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>
AMBR	MAGELA INGRID BORGES VEL	1017 EAST RIVER DRIVE, MARGATE FL 33063	<input checked="" 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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Dated OCTOBER 7TH 2022

JOSE ORLANDO BORGES VELIZ

Typed or printed name of signee

Filing Fee: \$25.00