

L22000275825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

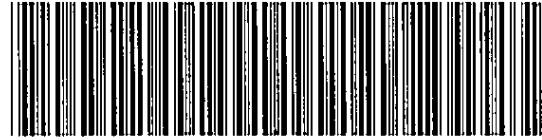
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2022 JUL 20 PM 9:26
Clerk of Court

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CP I 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:

JORGE L CRUZ FLORES
Name of Person
CP I TRUCKING LLC
Firm/Company
8445 MATTITUCK CIR
Address
ORLANDO, FL 32829
City/State and Zip Code
krzeuban50@gmail.com
E-mail address: (to be used for future annual report notification)

2022 JUL 20 AM 9:26

FILED

For further information concerning this matter, please call:

JORGE L CRUZ FLORES
Name of Person
334 685-4003
at ()
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

If Changing Registered Agent, Signature of New Registered Agent

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	JORGE L CRUZ FLORES		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

CHANGE FROM PRESIDENT TO AMBR

E. Effective date, if other than the date of filing: 07/17/2022 (optional)

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 JULY 17, 2022

Signature of a member or authorized representative of a member

JORGE L CRUZ FLORES

Typed or printed name of signee

Filing Fee: \$25.00