

122000282694

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

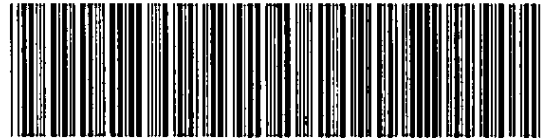
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/11/22-01521-015 \*\*\*03.02

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2022 AUG 11 AM 8:39

STATE OF FLORIDA  
TALLAHASSEE, FL

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** G'S 172 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:

Samuel J. Gonzalez  
Name of Person

G'S 172 Trucking, LLC  
Firm/Company

5323 Bold Venture Place  
Address

Wesley Chapel, FL 33544  
City/State and Zip Code

gstruckingllc22@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Samuel J. Gonzalez at ( 615 ) 663-3098  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |                                             |                                                                        |                                                                                                  |                                                                                                                                       |
|---------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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SECRETARY OF STATE  
ALLAHASSEE, FL

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

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

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

| Title | Name               | Address                 | Type of Action                          |
|-------|--------------------|-------------------------|-----------------------------------------|
| CEO   | Samuel J. Gonzalez | 5323 Bold Venture Place | <input checked="" type="checkbox"/> Add |
|       |                    | Wesley Chapel, FL 33544 | <input type="checkbox"/> Remove         |
|       |                    |                         | <input type="checkbox"/> Change         |
|       |                    |                         | <input type="checkbox"/> Add            |
|       |                    |                         | <input type="checkbox"/> Remove         |
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2022 AUG 11 AM 8:39  
SEPTEMBER 11  
TALLAHASSEE, FL

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2022 AUG 11 AM 8:39  
SEAL DIV OF FBI  
TALLAHASSEE, FL

(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)

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.

  
Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**