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COVER LETTER

TO:

TO: Registration Se Division of Cor			
	ERRERA TRUCKING SERVI	CE LIMITED LIABILITY COMP	PANY
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	RUBEN HERRERA		
		Name of Person	
	RUBEN HERRERA TRU	CKING SERVICE LIMITED LIA	BILITY COMPAN
		Firm/Company	
	2536 W 8TH LN		
		Address	
	HIALEAH, FL 33010		
		City/State and Zip Code	
	RHERRERA6424@GMAI		
	E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
RUBEN HERRERA		786 298-6424	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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 Addres Registration S		<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co	
P.O. Box 632	.7	The Centre of	
Tallahassee, l	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

RUBEN HERRERA TRUCKING SERVICE LIMITED LIABILITY COMPANY

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{06/23/2022}{1}$ and assigned Florida document number _L22000285408 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: RUBEN HERRERA TRUCKING SERVICE L.L.C. The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 2536 W 8TH LN Enter new principal offices address, if applicable: HIALEAH, FL 33010 (Principal office address MUST BE A STREET ADDRESS) SAME AS ABOVE Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: RUBEN HERRERA Name of New Registered Agent: 2536 W 8TH LN New Registered Office Address: Enter Florida street address HIALEAH , Florida <u>³³⁰¹⁰</u>

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

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>	Address	Type of Action
MGR	RUBEN HERRERA	2536 W 8TH LN	
		HIALEAH, FL 33010	
			□Change
AP	LIZANDRA R HERRERA	2536 W 8TH LN	
		HIALEAH, FL 33010	=Remove
			☐ Change
			□Add
			□Remove
			☐ Change
			□Add
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record specifies a delayed effecti	ve date, but no	ot an effectiv	e time, at						
record specifies a delayed effecti d is filed.									
document's effective date on the Estretion of the Estreti		_ · 2022	·						

Filing Fee: \$25.00