Florida Department of State

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fo:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THREE K FAST CARRIER SERVICES INC

Account Number : 120180000033 Phone : (305)805-3516 Fax Number : (305)887-5844

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Alberto Alonso Quintana@amail

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WHITE LION TRUCKING LLC

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COVER LETTER

H2220002974573

TO: Registration 8 Division of Co		•	•
	JON TRUCKING LLC	,	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	First Name: ALBERTO (2) Last Names: Alonso Quintana	
		Name of Person	
	WHITE LION TRUCKIN	GLLC	
		Firm/Company	
	498 MARION OAKS MN		
		Address	
	OCALA, FL 34473		
	ALBERTOALONSOQUIN	City/State and Zip Code TANA@GMAIL.COM	
	E-mail address: (to be used for future annual report notif	icntum)
For further information	concerning this matter, please of	all:	
ALBERTO ALONSO QUINTANA		407 346-2654	
Name	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for	the following amount:		
国 S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Capy tedditional copy is enclosed)	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

Aug. 30. 2022 3:08PM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H220002914573

		City	, 1 101 104	Zip Code
	OCALA		, Florida <u></u>	73
New Registered Office Address:	498 MARRION	Enter Florida si	treet address	
Name of New Registered Agent:	498 MARION			
Name of Name Danistand Amount	ALBERTO AI	.ONSO QUINTANA		
B. If amending the registered agent and/or r agent and/or the new registered office addre	registered office ss here:	address on our recor	ds, <u>enter the nams</u>	e of the new registered
				75 3 W
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				FIG. 3
		OCALA, FL 34473		100 F
D. A. Janes and M. M. M. M. Marchine.		498 MARION OAK	S MNR	ZOZZ AUG 30 SEGRETAGY TALLAMAS
(Principal office address MUST BE A STREE	<u>I ADDRESS)</u>	<u></u>		202 TA
Enter new principal offices address, if applicable:		OCALA, FL 34473		
-		498 MARION OAK		
N/A The new name must be distinguishable and contain the w	ords "Limited Linhi	tity Company," the design	ation "LLC" or the abb	neviation "L.L.C."
A. If amending name, enter the new name of	i the iimiteu uan	nuty company nere:		
This amendment is submitted to amend the following	_	***		
Florida document number 1.22000372158	•			
The Articles of Organization for this Limited L.	iability Company	were filed on 08/25/2	022	and assigned
(Name of the Limit	(A Florida Limited	iny as it now appears on Liability Company)	our records.)	
WHITE LION TRUCKING LLC				

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

Aug. 30, 2022 3:08PM II 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

Title	Name	Address	Type of Action
AMBR	Alberto Alonso Iglesias	5942 W 18th Ct	🗀 Add
		Hialcah, Fl. 33012	■Remove
			□ Change
AMBR	Alberto Alonso Quintana	498 MARION OAKS MNR	플Add
		OCALA, FL 34473	Remove
			□ Change
			□ Remove
			Change
			□∧dd
			□ Remove
			□Change
			□Change

			□Remove
			U. 1. Mariana

N/A 			
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		-	
ffective date, if other than the c	08-30-2022	`	_ (optional)
an effective date is listed, the date must	he specific and earmot be prior	to date of filing or more than 90 c	lays after filing.) Pursuant to 605.0207
<u>late:</u> If the date inserted in this blo ocument's effective date on the Dep	ek does not meet the applic partment of State's records.	soic signiory ming requirem	rms, this date will not be listed as
record specifies a delayed effective	date, but not an effective ti	me, at 12:01 a.m. on the earli	er of: (b) The 90th day after the
i is filed.			
AUGUST 30	2022		
ented (Mail)	٠	<u> </u>	
\times WF			
X MAN	Signature of a member or author	orized representative of a member $ASD QUIN to do to the second state of signee to the second state of signees to the second stat$	r

Filing Fee: \$25.00