

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use this as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H240002231903)))



H240002231903ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : TRUCKING PERMITS AND MORE LLC
Account Number : I20140000047
Phone : (813)774-4726
Fax Number : (813)877-2186

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PEKE'S TRUCKING LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

M. SOLOMON
JUN 28 2024

RECEIVED

2024 JUN 28 PM 1:11

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024 JUN 28 PM 1:49

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PEKE'S 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:

REGLA LOPEZ

Name of Person

PEKE'S TRUCKING LLC

Firm/Company

7014 GRAND RIVER DR

Address

TAMPA, FL 33619

City/State and Zip Code

pekestrucking@yahoo.com

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

For further information concerning this matter, please call:

REGLA LOPEZ

813 562-6323

Name of Person

at (_____) _____
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

2024 JUN 28 PM 1:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PEKE'S TRUCKING LLC

(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 08/10/2023 and assigned
Florida document number 1.23000377060.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

7014 GRAND RIVER DR.

(Principal office address MUST BE A STREET ADDRESS)

TAMPA, FL 33619

Enter new mailing address, if applicable:

7014 GRAND RIVER DR

(Mailing address MAY BE A POST OFFICE BOX)

TAMPA, FL 33619

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:

Name of New Registered Agent:

RODOLFO ROSABALES DOMINGUEZ

New Registered Office Address:

7014 GRAND RIVER DR

Enter Florida street address

TAMPA

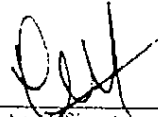
City

Florida 33619

Zip Code

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

2024 JUN 28 PM 1:49
SECRETARY OF STATE
TAMPA, FLORIDA

FILED

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	Regia Lopez	1317 RIDGEGREEN LOOP N	<input type="checkbox"/> Add
		LAKELAND, FL 33809	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Rodoifo Rosabales Dominguez	7014 Grand River Dr.	<input checked="" type="checkbox"/> Add
		TAMPA, FL 33619	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<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
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024 JUN 28 PM 1:49

FILED

