# L23000450301

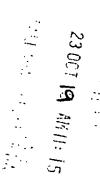
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(Document Number)
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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Quick Dumps And Trailes 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:
Trevor Boyk Name of Person
Firm/Company
980 GARDAN ROAD
Merrit Island FIA, 32952 City/State and Zipcode
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person  at (313)  Area Code  Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$25.00 Filing Fee ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, 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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Quick Dymps A	and Trailers LL	. 8
( <u>Name of the Limited Liabili</u> (A Florida	trud Tailers LL ( ity Company as it now appears on our re a Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Consider the Articles of Organization for this Limited Liability Consider the Articles of Organization for this Limited Liability Consideration for the Limited Liability Consideration of the Limited Articles of Organization for the Limited Liability Consideration for the Limited Liability Consideration for this Limited Liability Consideration for the Liability Consideration for	Company were filed on <u>9/28</u> 	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	address
	City	_, Florida
	•	-7

## 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	Trave Boyk	980 GARDAN READ	<u>L</u> Add	
		980 Garden Read Mercitt Island, FlA	□Remove	
		32952	□Change	
			□Add	
			□Remove	
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(If an effective   <u>Note:</u> If the	ate, if other than the date is listed, the date me date inserted in this to effective date on the l	ust be specific a block does not	nd cannot be price the appli	icable statutory fi	r more than 90 day	( <b>optional)</b> s after filing.) Pursua s, this date will not	nt to 605.0207 (2 t be listed as th
ne record spec ord is filed.	cifies a delayed effecti	ve date, but n	ot an effective	time, at 12:01 a.r	n. on the earlier	of: (b) The 90th c	lay after the
Dated	10-19	10	<u> 2023</u>	<u>3</u> .			
_	1914	Signature of	a member or au	horized representat	iva of a mancha		<u></u>
				nted name of signed			
		_	· ·				

Filing Fee: \$25.00