# La300533862

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	

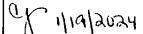




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### **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

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:	
	TIFFANY SMITH SWIN	r	
		Name of Person	<del></del>
	J & T SWINT HAULING	SMART	
		Firm/Company	<del></del>
	16669 PARKER RIVER S	STREET	
	· · · · · · · · · · · · · · · · · · ·	Address	
	WIMAUMA, FL 33598		
		City/State and Zip Code	
	JOHNNIESWINT@GMAI		
	E-mail address: (	to be used for future annual report notif	fication)
For further information c	oncerning this matter, please ca	all:	
Tiffany Smith Swint		786 797-9679 at ()	
Name o	f Person		Page Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 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		Street Address:	
Registration S Division of C		Registration Sec Division of Con	
P.O. Box 632	•	The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

202327028 77:7:55

J&TSWINT HAULING SMART LLC

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

(A Florida Limited Liability Company)

(A Florida Lim	nited Liability Company)	
The Articles of Organization for this Limited Liability Comp Florida document number 93 4690851 L23000533862	pany were filed on November 30, 2023	and assigned
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 I	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 ADDRESS	<u> </u>	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our records, enter the na	ame of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
	City	гір Соав

#### 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 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	JOHNNIE LEE SWINT	16669 PARKER RIVER STREET	□Add
		WIMAUMA, FL 33598	□Remove
			■Change
	~		□Add
			Remove
			☐ Change
			□Add
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			Change
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			□Change

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If an effective i <b>Note:</b> If the	date, if other than the date of filing:	5.0207 ted as
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earli	er of
	th day after the record is filed.	
The 90th		

Page 3 of 3

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