

L24000 ISS 770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

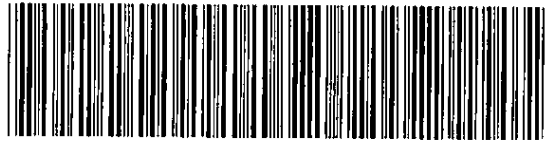
(Business Entity Name)

(Document Number)

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2024 MAY 28 AM 8:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2024 MAY 28 AM 8:48

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The Flatbed Fleet 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:

Joseph Douglas

Name of Person

The Flatbed Fleet LLC

Firm/Company

410 Florida Ave.

Address

St. Cloud FL. 34769

City/State and Zip Code

CraigStapp2003@yahoo.com

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

For further information concerning this matter, please call:

Joseph Douglas

Name of Person

at (407)

Area Code

361-4401

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  
511 E. Madison Street  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

The Flatbed Fleet 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 04/01/2024 and assigned Florida document number L24000155770.

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:**

**(Principal office address MUST BE A STREET ADDRESS)**

**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:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

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 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>
MGR	JOSEPH Douglas	410 Florida Ave.	<input checked="" type="checkbox"/> Add
		St. Cloud Florida	<input type="checkbox"/> Remove
		34769	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

1. What is the main purpose of the study?  
 2. What are the research objectives?  
 3. What is the significance of the study?  
 4. What is the scope of the study?  
 5. What are the limitations of the study?  
 6. What is the methodology used in the study?  
 7. What are the results of the study?  
 8. What are the conclusions of the study?  
 9. What are the implications of the study?  
 10. What are the future research directions?

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Dated May 28<sup>th</sup> 2024

JOSEPH DOUGLAS

Typed or printed name of signee