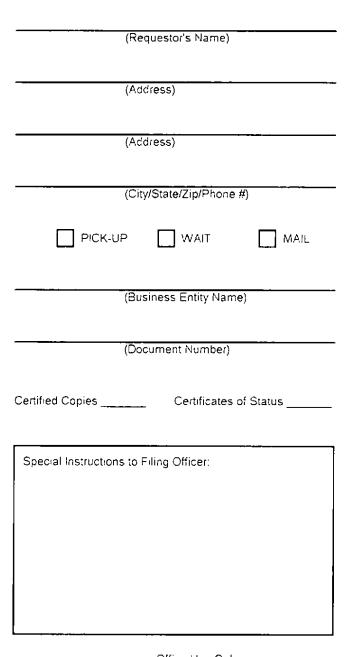
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COVER LETTER

Tallahassee, FL 32314

TO:

	Registration Se Division of Cor			
SUBJEC	300	DEZ G TRUKING LLC		
SUBJEC	/li <u></u>	Name of Lim	ited Liability Company	A.J.—
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		YUSIMI FERNANDEZ Q	UINONES	
			Name of Person	
		lul,		
			Firm/Company	
		11431 SW 192 ST		
			Address	-
		MIAMI FL 33157		
			City/State and Zip Code	
		yusimifernandez0922@gma		
		E-mail address: (to be used for future annual report no	otification)
For furth	er information e	oncerning this matter, please ca	all;	
YUSIMI	I FERNANDEZ	QUINONES	305 9397894 at ()	
	Name o	f Person	Area Code Dayti	nie Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25 .0	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 Addres		Street Address:	
	Registration S		Registration S	
	Division of C P.O. Box 632		Division of Co The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FERNANDEZ G TRUKING LLC		
(Name of the Lim	ited Liability Company as it now appears on (A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited I Florida document number L24000280703		024 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company here:	
FERNANDEZ G TRUCKING LLC		
The new name must be distinguishable and contain the	words "Limited Liability Company," the designation	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	22
		201:1
	•	
		20
Enter new mailing address, if applicable:		-
(Mailing address MAY BE A POST OFFICE	BOX)	-m -:
		2:
		ú
B. If amending the registered agent and/or agent and/or the new registered office address.		ds, enter the name of the new regis
Name of New Registered Agent:	YUSIMI FERNANDEZ QUINONES	
New Registered Office Address:		
	Enter Florida st	rcet 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 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

Title	<u>Name</u>	Address	Type of Action
MGR	YUSIMI FERNANDEZ QUINONI	11431 SW 192 ST MIAMI FL 33157	□Add
			□Remove
			EChange
			□Add
			□Remove
			☐Change
			Remove
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ective date, if other the effective date is listed, the	ian the date of fi date must be specific	ling: and cannot be prior	o date of filing or m	ore than 90 days after	nal) filing.) Pursuant to 605.020
te: If the date inserted in terms of the date of the d	n this block does n	ot meet the applica	ble statutory filin	g requirements, this	date will not be listed a
ament's circuive date o	iii the Department	of State's records.			
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	01	of a normber or autho	dati da		

Filing Fee: \$25.00