

P24000050428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

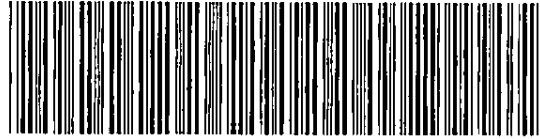
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900433799339

Amend

RECEIVED

2024 AUG 15 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

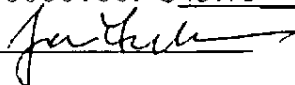
FILED

2024 AUG 15 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 16 2024
A RAMSEY

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE USE FUNDS FROM THIS ACCOUNT: I20210000160: \$43.75
AUTHORIZATION SIGNATURE: 
LIGHTNING LOGISTICS CARRIERS, INC. P24000050428
BUSINESS (Name) Document #.

☐ Walk in ☐ Pick up time ☐
☐ Mail out ☐ Will wait
☐ Photocopy

☐ Certified Copies of Articles of Organization

☐ Certificate of Status

NEW FILINGS

☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ CORP
☐ LLLP

AMMENDMENTS

☒ Amendment
☐ Resignation of R.A. Officer/Director
☐ Change of Registered Agent
☐ Dissociation or Resignation
☐ Merger
☐ Conversion

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name
☐ APOSTIL () Country

REGISTRATION/QUALIFICATIONS

☐ Foreign Filing
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ STATEMENT OF AUTHORITY

EXAMINER'S INITIALS: _____

COVER LETTER

FILE AND RECORD SECTION
FLORIDA CORPORATIONS

NAME OF CORPORATION: LIGHTNING LOGISTICS CARRIERS, INC.
DOCUMENT NUMBER: P24000050428

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NICHOLAS POSITANO
Name of Contact Person
LIGHTNING LOGISTICS CARRIERS, INC.
Firm/ Company
11611 PROSPECT DR., UNIT #3
Address
ODessa, FL 33556
City/ State and Zip Code
Nicholas Positano@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NICHOLAS POSITANO at 727 741-1832
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☒ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed)
--	---	---	--

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added;

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P - President, V - Vice President, T - Treasurer, S - Secretary, D - Director, TR - Trustee, C - Chairman or Chief, CFO - Chief Executive Officer, CFI - Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

Type of Action (check one)	Title	Name	Address
1) ☐ Change	P	NICHOLAS S. POSITANO	11611 PROSPECT DR, UNIT #3, ODESSA, FL 33556
☐ Add			
☒ Remove			
2) ☐ Change	S	DAVID R. POSITANO	11611 PROSPECT DR, UNIT #3, ODESSA, FL 33556
☐ Add			
☒ Remove			
3) ☐ Change	T	NICHOLAS POSITANO	11611 PROSPECT DR, UNIT #3, ODESSA, FL 33556
☐ Add			
☒ Remove			
☐ Change	S	CARL SMITH	11611 PROSPECT DR, UNIT #3, ODESSA, FL 33556
☒ Add			
☐ Remove			
5) ☒ Change	PO	ANTOINETTE POSITANO	11611 PROSPECT DR, UNIT #3, ODESSA, FL 33556
☐ Add			
☐ Remove			
6) ☐ Change			
☐ Add			
☐ Remove			

[illegible]

(The following section contains redacted information)

and date of each amendment(s) adoption: _____ if other than the
date this document was signed

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

" _____
(voting group)

Dated AUGUST 17TH, 2024

Signature Nicholas S. Postano
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

NICHOLAS S. POSTANO
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)