L0800001183

	(17)
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
·	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
L.	SELLERS
	MAY 20 2008

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EXAMINER



700129585377

05/16/08--01018--002 **25.00

SECRETARY OF STATE

FILED

COVER LETTER

Division of Cor			*		
SUBJECT: BELLA	TRANSPORTS LLO	3	B		
	(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:			
	Lloyd G. Ferguson				
		(Name of Person)			
		(Firm/Company)			
	11810 HIGHLAND PLACE				
		(Address)			
	CORAL SPRINGS, FL 33	3071			
		(City/State and Zip Code)			
For further information c	oncerning this matter, please co	all:			
Lloyd G. Ferguson		at (954) 675-1226			
(Name of Person)		(Area Code & Daytime Telephone Number)			
Enclosed is a check for the	ne following amount:	. •	•		
☑ \$25.00 Filing Fee	✓\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)		
MAILING ADDRESS:		STREET/COURIER	STREET/COURIER ADDRESS:		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

FILED

2008 MAY 16 PM 12: 55

SECRETARY OF STATE TALLAHASSEE, FLORIDA

BEL-AIR TRANSIT SERVICES 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 Liab		_ and assigned				
Florida document number L08000026783	·					
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	<u>he limited liab</u>	ility company here:				
BELLA TRANSPORTS LLC						
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company," the	designation "LLC	or the abbreviation		
Enter new principal offices address, if applicab	11810 HIGHLAND PLACE					
(Principal office address MUST BE A STREET	CORAL SPRINGS, FL 33071					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	11810 HIGHLAND RACE CORAL SPRINGS, FL 33071					
B. If amending the registered agent and/or registered agent and/or the new registered office	registered of e address here	fice address on our reco e:	ords, <u>enter the</u>	name of the new		
Name of New Registered Agent:				***		
New Registered Office Address:	New Registered Office Address: 11810 HIGHLAND PLACE, (Enter Florida street address)					
	CORAL SPRIM	,	, Florida _3307	,		
		(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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Type of Action** Address Title Name ☐ Add ☐ Remove □ Add □ Remove ☐ Add ☐ Remove □ Add ☐ Remove ☐ Add ■ Remove □ Add □ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Lloyd G. Ferguson Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00