

L11000093888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

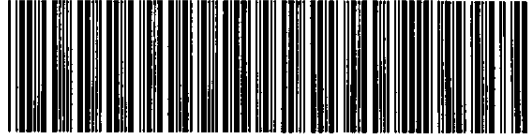
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600268410016

01/26/15--01016--010 **25.00

FILED
2015 JAN 26 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Cullen FEB - 3 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Q & B TRANSPORTATION SERVICES, 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:

VICTOR DELERME CPA

Name of Person

DELERME CPA, LLC

Firm/Company

303 PERIMETER CENTER NORTH 300

Address

ATLANTA, GA 30346

City/State and Zip Code

VICTOR@DELERMECPA.COM

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

For further information concerning this matter, please call:

VICTOR DELERME

at **678 585-6580**

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

FILED

2015 JAN 26 PM 12: 46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Q & B TRANSPORTATION 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 Liability Company were filed on JANUARY 12, 2015 and assigned Florida document number L11000093888.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Q & B TRANSPORTATION SERVICES, LLC

The new name must be distinguishable and end with 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)

10330 CYPRESS TRAIL DRIVE

ORLANDO, FL 32825

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

10330 CYPRESS TRAIL DRIVE

ORLANDO, FL 32825

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:

BERKIS LOPEZ

New Registered Office Address:

10330 CYPRESS TRAIL DRIVE

Enter Florida street address

ORLANDO

City

, Florida 32825

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
VP	QUIHURELTON ESPIRITUSANTO	10330 CYPRESS TRAIL DRIVE	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32825	<input type="checkbox"/> Remove
PRES	BERKIS LOPEZ	10330 CYPRESS TRAIL DRIVE	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32825	<input type="checkbox"/> Remove
	RAMON REYES	16430 BRISTOL LAKE CIRCLE	<input type="checkbox"/> Add
		ORLANDO, FL 32828	<input checked="" type="checkbox"/> Remove
	IBANOVA REYES	16430 BRISTOL LAKE CIRCLE	<input type="checkbox"/> Add
		ORLANDO, FL 32828	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated

1/20/15



Signature of a member or authorized representative of a member

QUINTON ESPINOZA

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

FILED
2015 JAN 26 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA