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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

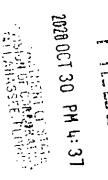




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RECEIVED SEP US 2220



OCT 30 2020 S. YOUNG



October 21, 2020

JOSEPH NAVEDO 2902 ROBIN LANE 25 ZOLFO SPRINGS, FL 33890

SUBJECT: NAVE.LLC

Ref. Number: L20000069215

We have received your document for NAVE.LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

ALL PAGES MUST BE RECEIVED, ONLY RECEIVED PAGE 10F3

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 420A00020824

Shelia S Young Regulatory Specialist II

www.sunbiz.org

TO: Registration Sect Division of Corpo		•	
SUBJECT:	ave LLC Name of Limi	ited Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Joseph	Name of Person	
		Firm/Company	
	2902	Robin Ly Address	> 35
	201F0	SPINCS FI City/State and Zip Code	33290
	L'hait address: (1	so be used for future annual report notifica	ition)
For further information con	cerning this matter, please ca	all:	
Name of P	Mayedo Person	at (() Daytime T	-9392 clephone 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 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO ARTICLES OF ORGANIZATION OF

Nave of LC		#67 8 M
(Name of the Limited Liab (A Flor	ility Company as it now appears on our reco ida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability	Company were filed on	1 And assigned
Florida document number L 2000 693	<u> </u>	6
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	am. Fleet LLC
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here		er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addi	
	City , 1	F lorida Zip Code

New Registered Agent's Signature, if changing Registered Agent:

ŀ

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

<u>Title</u>	Name	Address	Type of Action
			(]Remove
			□Change
			□Add
			□Remove
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			□Change

. If amending any other information, enter change(s) here: (Atta	wh additional sheets, if i	necessury.)
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Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of	(0	ptional)
Tran effective date is listed, the date must be specific and cannot be prior to date of Note: If the date inserted in this block does not meet the applicable statidocument's effective date on the Department of State's records	filling or more than 90 days, a utory filing requirements.	dier ffling.) Passant to 605 020 this date will not be listed a
ic record specifies a didayed effective date, but not an effective time, at 3, and is filed.	2:01 a.m. on the earlies of	? (5) The 90th day after the
Dated Oct 30 2000	ifesentative of a member	
Beth Typed or printed aims	0.50000	

Filing Fee: \$25.00