

M14 00001877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 JAN 20 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JAN 30 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kotte LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kristine Reed

Name of Person

The Miltner Law Firm, LLC

Firm/Company

7588 Central Parke Blvd. Suite 310

Address

Mason, OH 45040

City/State and Zip Code

kristine@miltnerlawfirm.com

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

For further information concerning this matter, please call:

Kristine Reed

866 740-5219
at ()

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☒ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
Kotte LLC
State: _____

2. The Florida document number of this limited liability company is: M14000001877

3. Jurisdiction of its organization: Ohio

4. Date authorized to do business in Florida: March 20, 2014

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Ark Logistics LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")
n/a

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

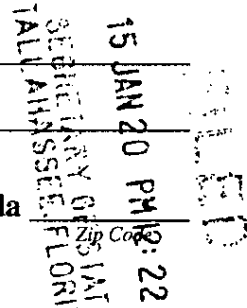
Name of New Registered Agent: n/a
New Registered Office Address: n/a
_____, Florida
City

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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
n/a



8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:
n/a

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the
aforementioned amendment(s), duly authenticated by the official having custody of records in the
jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

Rick Kotte, Member

Typed or printed name of signee

Filing Fee: \$25.00

201436401362

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/31/2014	201436401362	AMEND/ARTICLES- ORGANIZATION/DOM. LLC (LAM)	50.00	100.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

THE MILTNER LAW FIRM LLC
KRISTINE REED
7588 CENTRAL PARKE BLVD
MASON, OH 45040

**STATE OF OHIO
CERTIFICATE**

Ohio Secretary of State, Jon Husted

1508246

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

ARK LOGISTICS LLC

and, that said business records show the filing and recording of:

Document(s)
AMEND/ARTICLES-ORGANIZATION/DOM. LLC

Document No(s):
201436401362

Effective Date: 12/30/2014



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 31st day of December, A.D. 2014.

Jon Husted

Ohio Secretary of State

FILED
15 JAN 20 PM 12:22
TALLAHASSEE, FLORIDA
SECRETARY OF STATE