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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS

OCT 14 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LIMITLESS LIVING, 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:

Joseph C. Sciarrotta
(Name of Person)

Haiti Air Logistics, LLC.
(Firm/Company)

3670 SW 106th TERRACE
(Address)

Davie, Florida 33328
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Joseph C. Sciarrotta at (954) 423-6674 / 305-790-1681
(Name of Person) (Area Code & Daytime Telephone 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT

To

ARTICLES OF ORGANIZATION
OF

Limitless Living, 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 07/14/2003 and assigned
Florida document number L 030000 25510

This amendment is submitted to amend the following: NAME Change

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

Haiti Air Logistics, 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)

3670 SW 106th TER
DAVIE, Florida 33328

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3670 SW 106th TER
DAVIE, Florida 33328

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:

JCS, Investment Associates, Inc
c/o Joseph C. Sciarrotta

New Registered Office Address:

3670 SW 106th TERRACE

(Enter Florida street address)

Davie

(City)

Florida

33328

(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.

Joseph C. Sciarrotta
(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
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MGR	Joseph C. Sciarrotta	3670 SW 106 th TER DAVIE, FL 33328	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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MGR	Jean Michel Ceteoute	2260 NW 167 th TER. Pembroke Pines, Florida 33023	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
ASSISTANT Manager	Marie G Vincent Ceteoute		

	Same		<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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MGR	Mark Thyon II	2751 Taft Street #404 Hollywood, Florida 33020	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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MGR	Lori Dubberly	2631 NW 72 nd Way Hollywood, Florida 33020	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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ASSISTANT			
MGR	Anita Sciarrotta	3670 SW 106 th Street DAVIE, Florida 33328	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

CLERK OF STATE
TALLAHASSEE, FLORIDA

2009 OCT 13 AM 10:03

FILED

Dated

October 8th 2009

Signature of a member or authorized representative of a member
Joseph C. Sciarrotta
Manager
Typed or printed name of signee