

# L03000029242

\_\_\_\_\_  
(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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11 SEP 26 PM 4:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
SEP 27 2011

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: GW PARKWAY INVESTMENTS, 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:

**MAURICIO URBINA**

Name of Person

**GW PARKWAY INVESTMENTS, LLC**

Firm/Company

**7300 W. CAMINO REAL, SUITE 233**

Address

**BOCA RATON, FL 33433**

City/State and Zip Code

**MAURICIO@APOLLOTRANSPORTATION.COM**

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

For further information concerning this matter, please call:

**MAURICIO URBINA**

Name of Person

at ( 561 )

**542-4584**

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

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TALLAHASSEE, FLORIDA

**(Name of the Limited Liability Company as it now appears on our records.)**  
**(A Florida Limited Liability Company)**

Page 1 of 2

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:

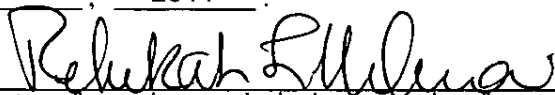
MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	REBEKAH L URBINA	9934 SHEPARD PLACE	<input type="checkbox"/> Add
		WELLINGTON, FL 33414	<input checked="" type="checkbox"/> Remove
MGRM	MICHAEL L MEADOWS	2240 SLOANE PLACE	<input checked="" type="checkbox"/> Add
		WELLINGTON, FL 33414	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated SEPTEMBER 21, 2011



Signature of a member or authorized representative of a member

REBEKAH L URBINA

Typed or printed name of signee