# 1550059368

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	<u></u>
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



800074795488

05/18/06--01020--013 \*\*25.00

OF MAY 18 PH 1:02

" July



# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: TRANSFLORIDIAN, 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:	
BETTE DRAKE (Name of Person)	
TRANSFLORIDIAN, LLC (Firm/Company)	
1021 NW 21ST STREET (Address)	
FT. LAUDERDALE, FLORIDA 33311 (City/State and Zip Code)	
For further information concerning this matter, please call:	
BETTE DRAKE  (Name of Person)  at (954) 523-0859 X 223  (Area Code & Daytime Telephone Number)	,
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)	osed)
MANUNCADDRESS. STREET/COUDIED ADDRESS.	

## 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

SECRETARY OF STATE DIVISION OF CORPORATION

TRANSFLORIDIAN, LLC

(Present Name)
(A Florida Limited Liability Company)

	$\cdot$
FIRST:	The Articles of Organization were filed on <u>6-9-05</u> and assigned document number <u>L0500059268</u> .
SECOND:	This amendment is submitted to amend the following:
	THE ONLY MANAGER SHOULD BE BETTE DRAKE.
	BILL HENNESSEY SHOULD HAVE BEEN REMOVED WHEN
	BETTE DRAKE WAS ADDED AS A REGISTERED AGENT
	IN MARCH OF 2006.
Dated	TH DAY OF MAY , 2006
	Belleviersey
	Signature of member or authorized representative of a member
	BILL HENNESSEY  Typed or printed name of signee
	ryped or printed name of signee

Filing Fee: \$25.00