## L05000114630

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
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**EXAMINER** 



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 30, 2008

DUSTIN M. SCHUTTEMEYER 10676 PEBBLE COVE LANE BOCA RATON, FL 33498

SUBJECT: DMS TRANSPORT LLC

Ref. Number: L05000114630

DECRETARY OF STATE US OF CORPORATIONS

We have received your document for DMS TRANSPORT LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is #P99000045156, D.M.S. SERVICES INC..

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 608A00026948

## **COVER LETTER**

TO:

**Registration Section** 

Division of Cor	porations		
SUBJECT:	DMS TRA	ANSPORT LLC	
SOBJECT.		ited Liability Company)	<del>-</del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
			<b>8</b>
	D	USTIN SCHUTTEMEYER	A A Section 1
		(Name of Person)	20 20
			08 MAY 20 AM I
		(Firm/Company)	08 MAY 20 AM 11: 00
	1	0676 PEBBLE COVE LANE	00
		(Address)	
	D	OCA RATON, FL 33498	
	В	(City/State and Zip Code)	
For further information of	concerning this matter, please c	all:	
DUSTIN M. S	CHUTTEMEYER	at ( 561 ) 542-0078	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for t	he 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 Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 32301	ons r Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	70 7017	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	- Sign	7
(A Florida Elimited Elaomity Company)	至影	<del>1</del> 1
The Articles of Organization for this Limited Liability Company were filed on11/30/2005 ar	nd asigne	W.C.
Florida document number L05000114630	<b>**</b>	39C
		翌
This amendment is submitted to amend the following:	AH 11:00	SHOT
A. If amending name, enter the new name of the limited liability company here:		
DMS MOBILE SERVICES, LLC		
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" of "L.L.C."	r the abbre	viatio
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
maning unuress man DD at 1 GGP Of FICE BOX		
B. If amending the registered agent and/or registered office address on our records, enter the na	me of th	ie ne
registered agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address: (Enter Florida street address)		-
, Florida	p 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.

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>	Address	Type	of Action
			Ac	ld emove
			Ac Re	id emove
			<b></b> Ac Re	dd emove
			Ac Re	dd emove
			Ad Re	ld move
			Ad Re	ld move
D. If ame	nding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	08 MAY 20 AM I	FILED SECRETARY OF S BIVISION OF CORPOR
Dated		2008 .	AH II: 00	ED Y OF STATE CORPORATIONS
	\J	er or authorized representative of a member TIN M. SCHUTTEMEYER		
	Туре	ed or printed name of signee		-

Page 2 of 2

Filing Fee: \$25.00