## 0000003710

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
(Oity/State/Zip/Filone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



000144925240

· Ú3/06/09--01010--014 \*\*25.00

09 MAR -6 AM IL: 07
SECRETARY OF STATE

- - - WW

M. THOMAS

MARAT 9 9 2009

EXAMINER

## COVER LETTER

TO: **Registration Section Division of Corporations** 

Beach Executive limousine & Senoan UC (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:

PAIM Beach Etecutive li Mousine & several (Firm/Company)

1155 N.W. 18 H AVE DELTAY BEACH F1. 33

(Address)

Delsay Beach F1. 33445

(City/State and Zip Code)

For further information concerning this matter, please call:

zerie Ali

(Name of Person)

at (561) 243-2800

(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

HHIN BEACH EXECUTIVE	- LIMOUSINE	sevan
(Name of the Limited Liability Compan (A Florida Limited Li	<u>y as it now appears on our</u> iability Company)	records.)
The Articles of Organization for this Limited Liability Company Florida document number 7, LOGOOOO371	were filed on Dec 0	
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here:	
The new name must be distinguishable and end with the words "Limit "L.L.C."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	761 N.W. 94	designation "LLC" or the abbreviation  A COUNT SEE THE
Enter new mailing address, if applicable:	BOCA ROYON Same	TATE ORIDA
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ords, enter the name of the nev
Name of New Registered Agent: Zeri.  New Registered Office Address: SAME AS A	e Ali Rove	
new Registered Office Auditess.	(Enter Flor	ida street address)
		, Florida
	(City)	(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.

(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:

<u>Citle</u> 1612	Name Haley feinstein	Address 1155 N.W. 18+4AVe Delray Deach F1.33445	Type of Action
-	. (	•	Add Remove
			Add Remove
-			Add Remove
			A Remove
			Add Semon
			Add Remove
). If amei	nding any other information, enter	r change(s) here: (Attach additional sheets, if necessary.)	)
·			
•		1	
oated	Jenie X	Le.	

Page 2 of 2

Filing Fee: \$25.00