

L09000098985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

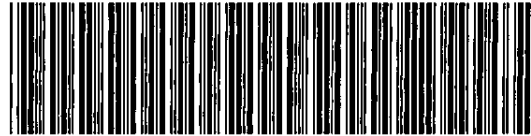
(Business Entity Name)

(Document Number)

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02/24/12--01008--020 **25.00

FILED
12 MAR 12 PM 2:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

MAR 13 2012



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 27, 2012

ALEJANDRA SOTELO-PAZ
5300 WEST IRLO BRONSON MEMORIAL HWY 121
KISSIMMEE, FL 34746

SUBJECT: THE QUEEN & CO. SOLUTIONS, LLC
Ref. Number: L09000098985

We have received your document for THE QUEEN & CO. SOLUTIONS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted was incomplete. I am enclosing a complete form for your convenience. Please complete the enclosed form and return to our office along with a copy of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 312A00007939

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Queen & Co Solutions, 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:

Alejandra Sotelo-Paz

Name of Person

Firm/Company

5300 West Irlo Bronson Memorial Hwy -121

Address

Kissimmee - Florida - 34746

City/State and Zip Code

tickets@floridabusreservations.com

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

For further information concerning this matter, please call:

Alejandra Sotelo-Paz

Name of Person

at (407)

7053888 ext 226

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**

The Queen & Co Solutions, LLC

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

FILED
12 MAR 12 PM 2:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02/20/2012 and assigned
Florida document number L09000098985.

This amendment is submitted to amend the following:

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

FLORIDA BUS RESERVATIONS, 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)

109 Ambersweet Way #202

Davenport, Florida

33897

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

~~109~~ PO Box 1032

Davenport, Florida Intercession City - FL

~~33897~~ 33848

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:

New Registered Office Address:

Enter Florida 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:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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

Dated _____

Signature of a member or authorized representative of a member

Alejandra F. Solis Paz

Typed or printed name of signee