

L10 0000002499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2021 AUG -2 PM 3:02
U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLORIDA LUXURY TRANSPORTATION 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:

JULISSA ROSADO

Name of Person

DCM SERVICES CENTER INC

Firm/Company

2529 W BUSCH BLVD STE 1000

Address

TAMPA, FL 33618

City/State and Zip Code

DCMSERVICECENTER@GMAIL.COM

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

For further information concerning this matter, please call:

JULISSA ROSADO

813 990-8630

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FLORIDA LUXURY TRANSPORTATION LLC

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

The Articles of Organization for this Limited Liability Company were filed on 01/07/2010 and assigned
Florida document number L10000002499.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

DCM SERVICES CENTER INC

New Registered Office Address:

2529 W BUSCH BLVD STE 1000

Enter Florida street address

TAMPA

City

, Florida 33618

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 605, 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.


Juliana Pasado
If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	GLORIA RIANO	3601 EDNA CT	<input checked="" type="checkbox"/> Add
		TAMPA, FL 33614	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LUIS E CASTRO	7016 DELORA CT	<input type="checkbox"/> Add
		ORLANDO, FL 32819	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LUZ M ARIAS	7016 DELORA CT	<input type="checkbox"/> Add
		ORLANDO, FL 32819	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	FABIOLA CASTRO	7016 DELORA CT	<input type="checkbox"/> Add
		ORLANDO, FL 32819	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ARMANDO Balsa MURULIZ	4813 GROVE POINT DRIVE	<input type="checkbox"/> Add
		TAMPA, FLORIDA 33624	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

EFFECTIVE JULY 20, 2021 100 PERCENT OF MEMBERSHIP INTEREST WILL/HAVE BEEN
TRANSFERED (SOLD) TO GLORIA RIANO AND ARMANDO Balsa MURSULIZ. EACH
HOLDING 50% OF MEMBERSHIP INTEREST.

2021 AUG -2 PM 3:02
Luis E. Castro

E. Effective date, if other than the date of filing: 07/20/2021 **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated JULY 20 2021

Luis E Castro

Signature of a member or authorized representative of a member

LUIS E CASTRO

Typed or printed name of signee