

K10 0000108728

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

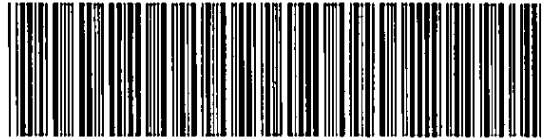
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/20/19--01039--028 **25.00

FILED
2019 JUL 11 A 11:28
FBI - SEATTLE

2019 JUL 11
6:00 PM

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Transitions Commuk 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:

Justin Rison
Name of Person
Transitions Commuk Solutions, LLC
Firm/Company
45 West Smith St.
Address
Winter Garden, FL 34787
City/State and Zip Code
Justin.Rison@transit4u.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Justin Rison at (407) 779-5983
Name of Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 11, 2019

JUSTIN RISON
45 WEST SMITH ST
WINTER GARDEN, FL 34787

SUBJECT: TRANSITIONS COMMUTE SOLUTIONS LLC
Ref. Number: L10000108728

We have received your document for TRANSITIONS COMMUTE SOLUTIONS LLC and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The title Mr or Mrs are not titles for an LLC.

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) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 319A00011680

RECEIVED

2019 JUL 11 AM 10:10

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~~5719~~ JUL 11 A 11: 38

The Articles of Organization for this Limited Liability Company were filed on 10/19/2018 and assigned Florida document number 410000108728.

Page 1 of 3

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>
MGR	Debbie Asbman	45 West Smith St	<input checked="" type="checkbox"/> Add
		Winter Garden, FL	<input type="checkbox"/> Remove
		34787	<input type="checkbox"/> Change
MGR	Shakai Joyner	SAME AS ABOVE	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ron Helman	SAME AS ABOVE	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jeff Bicarlis	SAME AS ABOVE	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

(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)

(b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee