111000024799

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000252252690

10/07/13--01009--003 **30.00

2019 OCT -7 PM 1: 36
SLC ETANY OF STATE
ALL-ANIA SSECTION
SC TO STATE
ALL-ANIA ST

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT

ULTIMATE IMPORT EXPORT 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:

RICARD SALOMON

Name of Person

ULTIMATE IMPORT EXPORT LLC

Firm/Company

11640 NW 39 ST

Address

CORAL SPRINGS, FL 33065

City/State and Zip Code

smoothrico@earthlink.net

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

For further information concerning this matter, please call:

RICARD SALOMON

954,543-7243

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) Certificate of Status & Certificate Copy (additional copy is encosed)

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

ULTIMATE IMPORT EXPORT 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 02/28/2011 ____ and assigned Florida document number L11000024799 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 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) 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: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JUDE LAFRANCE	1235 NW 112 ST	(Add
		MIAMI, FL 33167	Remove
			
			Add
			Remove
		1=	
			Add
			Remove
			B Add
			Remove
			Add
			Remove
			Add
			Remove

SEPTEMBER 22nd 2013 Signature of a member of authorized representative of a member	, , , , , , , , , , , , , , , , , , ,	_
Signature of a member of authorized representative of a member		
Signature of a member of authorized representative of a member		
Signature of a member of authorized representative of a member		
Signature of a member of authorized representative of a member	<u> </u>	
Signature of a member of authorized representative of a member	SEPTEMBER 22nd	1 2013 (
Signature of a member of authorized representative of a member	OLI TENIDER ZZNO	\(\daggregarrightarrow\)\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
· · · · · · · · · · · · · · · · · · ·		
	Signat	ure of a member or authorized representative of a member
RICARD SALOMON	RICARD SALOM	ION

Page 3 of 3

Filing Fee: \$25.00

2013 OCT -7 PM 1: 36