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2011 JUN 17 AM MILLEY
SCHREIGARY DE SIAIDA
MASSEE, FLORIDA

C. LEWIS

JUN 2 0 2011

EXAMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Secure C	ar Transport LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	condence concerning this matte	r to the following:	
		George Goldstein	
		Name of Person	
	Sec	cure Car Transport LLC	
		Firm/Company	
	1934 Ho	llywood Boulevard, Suite 203	3
		Address	
	Но	ollywood, Florida 33020	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notifica	ation)
For further information	concerning this matter, please	call:	
Ge	orge Goldstein	at (954) 4	94-8977
Name	of Person	at (954) 4 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

FILED

2011 JUN 17 AM H: 18

MINNETARY OF STATE

	Secure Car Transport LLC	TALEAHASSEE, FLORIDA
(Name of the Lim	nited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limite	ed Liability Company were filed on	May 25, 2011 and assigned
Florida document number L11000	0061467	
This amendment is submitted to amend the	following:	
A. If amending name, enter the new nam	ne of the limited liability company her	<u>re</u> :
The new name must be distinguishable and end "L.L.C."	d with the words "Limited Liability Compa	any," the designation "LLC" or the abbreviation
Enter new principal offices address, if ap	oplicable:	
(Principal office address MUST BE A STI	REET ADDRESS)	
		
Enter new mailing address, if applicable:	<u> </u>	
(Mailing address MAY BE A POST OFFI	(CE BOX)	
B. If amending the registered agent a registered agent and/or the new registere	3	our records, enter the name of the new
registered agent unaror the new registere	ornee address nove.	
Name of New Registered Agent:		
New Registered Office Address:		ter Florida street address
	Lite	, 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 **Type of Action** Title **Address** <u>Name</u> **MGRM** Aron Halpern 1500 S Ocean Drive, Suite 14K 🗸 Add Remove Hollywood, Fl 33019 ☐ Add ☐ Remove ☐ Add ☐ Remove Add 🔲 Remove ∏Add Remove \square Add 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 George Goldstein Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00