## L110000067893

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
A. LUNT				

AUG -4 2011

EXAMINER

Office Use Only

700210422737

08/03/11--01010--011 \*\*25.00

## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJE	CT: Piaget- Jermaine Transportation LLC. Name of Limited Liability Company			
The end	closed Articles of Amendment and fee(s) are submitted for filing.			
Please r	return all correspondence concerning this matter to the following:			
	Derrick Williams Name of Person  Piaget - Jermaine Transportation LLC Firm/Company			
P.O. Box 5435 Address				
	Address  Hollywood Fl 33023  City/State and Zip Code  Piaget Jermaine a Yahoo.com  E-mail address: (to be used for future annual report notification)			
For furt	her information concerning this matter, please call:			
	Name of Person at (954) 257-5286  Area Code & Daytime Telephone Number			
Enclose	d is a check for the following amount:			
\$25.	00 Filing Fee \$\ S30.00 Filing Fee &			

**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

Piaget-Jermain OName of the Limited Liabili	e Transportation	1 LLC
(Name of the Limited Liabili (A Florida	ity Company as it now appears of a Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability	Company were filed on	10/2011 and assigned
Florida document number <u> </u>	793	,
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the w "L.L.C."	vords "Limited Liability Company	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	· <del></del>	
(Principal office address MUST BE A STREET ADL	DRESS)	
	<del></del>	
		AHA AHA AHA
Enter new mailing address, if applicable:		SSS
(Mailing address MAY BE A POST OFFICE BOX)		
	<u></u>	F S
B. If amending the registered agent and/or regi	istered office address on our	records, enter the name of the new
registered agent and/or the new registered office ad	<u>ldress here</u> :	
Name of New Registered Agent:		
New Registered Office Address:	F. d.	Florida street address
•	Enter	rioriaa sireet aaaress
	City	, Florida Zip Code
	City	zip coue

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 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 **Title** <u>Name</u> **Address** Type of Action Secretary Brenda Williams
Treasurer Rose Brown Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Signature of a member or authorized representative of a member Errick Williams
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00