

L1100000 80560

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

AUG 19 2011

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Continental Leasing Group 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:

Aixa D. Aviles Aixa D. Aviles  
Name of Person  
Equinox Solutions LLC  
Firm/Company  
2800 S Orange Blossom Trail  
Address  
Orlando, FL 32805  
City/State and Zip Code  
a.aviles@eq-so.com  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

at ( 407 ) Aixa D. Aviles at ( 407 ) 850-7280  
Area Code & Name of Person Contacted Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$5.00 Filing Fee  
(additional copy is enclosed)  
☒ \$25.00 Filing Fee &  
Certificate of Status  
(additional copy is enclosed)  
☐ \$30.00 Filing Fee &  
Certificate of Status  
(additional copy is enclosed)  
☐ \$55.00 Filing Fee &  
Certificate of Status  
(additional copy is enclosed)  
☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certificate of Status  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
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**

**Continental Leasing Group 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 07/13/2011 and assigned

Florida document number L11000080560

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 "LLC."

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)**

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

**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:**

Enclosed is a check for the fol

**New Registered Office Address:**

☐ \$25.00 Filing Fee ☒

Enter Florida street address

Enter Florida street address

City

Florida

Zip Code

City

Florida

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 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

Title	Name	Type of Action	Address	Type of Action
MGR	Ricardo Villamil	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	2800 S Orange Blossom Trail Orlando, FL 32805	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Dean Tasman	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	5800 Dean Road Orlando, FL 32817	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
		<input type="checkbox"/> Add <input type="checkbox"/> Remove		<input type="checkbox"/> Add <input type="checkbox"/> Remove
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		<input type="checkbox"/> Add <input type="checkbox"/> Remove		<input type="checkbox"/> Add <input type="checkbox"/> Remove

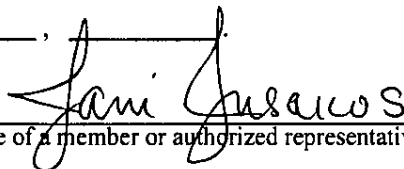
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Change mailing address for:

5 Crystal Lake Jani Yusakos; correct address: 3400 S Crystal Lake Drive, ORL, FL 32806

3 Kirkman Rd Juan C. Reyes; correct address: 4308 S Kirkman Rd #1702, ORL, FL 32811

Dated \_\_\_\_\_



Signature of a member or authorized representative of a member

Jani Yusakos

Typed or printed name of signee

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