## L11000097878

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SECRETARY TO SERVE DIVISION OF COMPANY TO SERVE.

J. HARRIS

## **COVER LETTER**

TO: **Registration Section Division of Corporations** 

BEST DRIVERS OF FLORIDA 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:

BENITA D MOODY

Name of Person

BDF, LLC

Firm/Company

P O BOX 1006

Address

ALCOA TN 37701

City/State and Zip Code

BMOODY@EVINCO.COM

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

For further information concerning this matter, please call:

BENITA D MOODY

Name of Person

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 6, 2014

**BENITA D MOODY** PO BOX 1006 ALCOA, TN 37701

SUBJECT: BEST DRIVERS OF FLORIDA, LLC

Ref. Number: L11000097878

We have received your document for BEST DRIVERS OF FLORIDA, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The effective date must be specific and cannot be prior to the date of filing.

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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 514A00012225

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida L	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Cor Florida document number <u>L11000097878</u>	mpany were filed on AUGUST 25, 2011	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
BDF,LLC BDFL LIC		
The new name must be distinguishable and end with the words "Limit	ted Liability Company," the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	<b>11</b>
		<u> </u>
		<b>2</b> 255
Enter new mailing address, if applicable:		<b>2</b> 選集
(Mailing address MAY BE A POST OFFICE BOX)		1
		<b>o</b> 🐺
B. If amending the registered agent and/or registe registered agent and/or the new registered office addre		name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Ziv Code
	City	zip 1. oae

New Registered Agent's Signature, if changing Registered Agent:

BEST DRIVERS OF FLORIDALLIC

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 605, 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 Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
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D: If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
11100 18
E. Effective date, if other than the date of filing: John John (optional) (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)
Dated MAY-28 WAR 12014
Signature of a member or authorized representative of a member  BENITA DMOODY
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00