

L11000 107258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

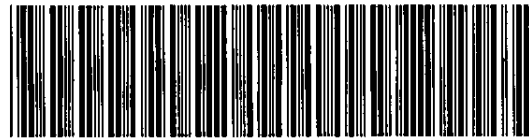
(Business Entity Name)

(Document Number)

Certified Copies



Certificates of Status



000254399690

12/03/13--01031--003 **60.00

FILED

13 DEC 17 AM 11:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Special Instructions to Filing Officer:

Office Use Only

DEC 18 2013

T. BROWN

~~112 61851~~

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALPHA BRIGHT TRANSPORTATION L.L.C.
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:

NAOUAR KADDOUR

Name of Person

ALPHA BRIGHT TRANSPOTATION L.L.C.

Firm/Company

9998 SHADOW CREEK DR

Address

ORLANDO, FL 32832

City/State and Zip Code

ITRANSITINTL@GMAIL.COM

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

For further information concerning this matter, please call:

NAOUAR KADDOUR

Name of Person

407 4979704

at ()

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$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
13 DEC 17 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ALPHA BRIGHT TRANSPORTATION L.L.C.

(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 09/20/2011 and assigned
Florida document number L11000107258.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

*** ITRANSIT INTERNATIONAL LLC

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)

9998 SHADOW CREEK DR

ORLANDO, FL 32832-5635

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:

SALAH E. HANI

New Registered Office Address:

9998 SHADOW CREEK DR

Enter Florida street address

ORLANDO

City

Florida 32832-5635

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:

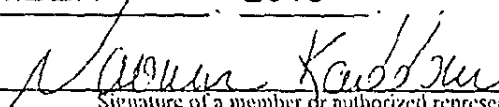
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SALAH E. HANI	9998 SHADOW CREEK DR	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32832-5635	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<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.)*

Dated 07 DECEMBER 2013



Signature of a member or authorized representative of a member

NAJAR KADDUR

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00