

L11 000126668

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

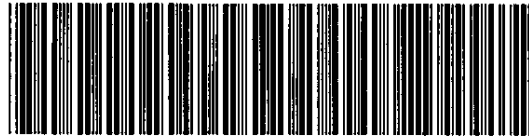
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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 24, 2014

NERLIN CHARLES
612 NW 8 STREET
FORT LAUDERDALE, FL 33311

SUBJECT: ANG AFRICAIN AUTO SERVICES , LLC
Ref. Number: L11000126668

We have received your document for ANG AFRICAIN AUTO SERVICES , 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 registered agent must sign accepting the designation.

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.

Tammi Cline
Regulatory Specialist II

Letter Number: 814A00006239

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL 32314

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **ANG AFRICAN AUTO SERVICES , 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:

NERLIN CHARLES

Name of Person

ANG AFRICAN AUTO SERVICES , LLC

Firm/Company

612 NW 8 STREET

Address

FORT LAUDERDALE FL 33311

City/State and Zip Code

SPECIALVIBRATIONS@GMAIL.COM

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

For further information concerning this matter, please call:

NERLIN CHARLES

Name of Person

at **754 204-7866**

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

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TALLAHASSEE, FL
CLERK OF THE COURT

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ANG AFRICAN AUTO SERVICES ,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 03/17/2014 and assigned
Florida document number L11000126668.

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 "L.L.C."

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)

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:

<u>Name of New Registered Agent:</u>	<u>NERLIN CAHRLES</u>
<u>New Registered Office Address:</u>	<u>612 W 8 STREET</u> <small>Enter Florida street address</small>
	<u>FORT LAUDERDALE</u> , Florida <u>33311</u> <small>City Zip Code</small>

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 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, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MANAGER	NERLIN CHARLSES	612 W 8 STREET	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE FL 33311	<input type="checkbox"/> Remove
AMBR	ADRE CHARLES	612 NW 8 STREET	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE FL 33311	<input type="checkbox"/> Remove
AMBR	GUIRLANDAISE JEAN BAPTISTE	1465 E 147 STREET	<input checked="" type="checkbox"/> Add
		MIAMI FL 33161	<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

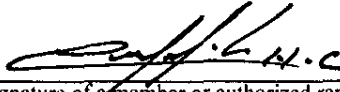
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TALLAHASSEE FLORIDA

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

E. Effective date, if other than the date of filing: _____ (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 03-18, 2014



Signature of a member or authorized representative of a member

NERLIN CHARLES

Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

2014/03/18 PM 4:02
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TALLAHASSEE, FLORIDA

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