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EXAMINER

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03/26/12--01034--011 **25.00

COVER LETTER:

TO:	Registration Sec Division of Corp		1.3%	*
	•			**************************************
SUBJ	ECT:	ARIS TAXI TRANS	PORTATION LLC	
		Name of Limited Li	ability Company	
			•	
The er	nclosed Articles of A	Amendment and fee(s) are submitted	d for filing.	
Please	return all correspor	idence concerning this matter to the	following:	
		ROSA	RIO ARISMENDY	
			Name of Person	
		ARIS TAXI T	RANSPORTATION LLC	
			Firm/Company	(42)** N
			UDDEN LAKE OT	第二 の [
		2322 F	HIDDEN LAKE ST Address	
			Nations	
		KISSI	MMEE, FL 34741	\$ 5
		City	/State and Zip Code	
	_	E mall address (to be a	sed for future annual report notificatio	
			sed for future annual report notificatio	n)
For fu	rther information co	ncerning this matter, please call:		,
	ROSARI	O ARISMENDY	at (407) 600 - 00	120
	Name of		Area Code & Daytime Tele	phone Number
F. I		0.11		
	sed is a check for the	-)	1
√ \$2.	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & [Certified Copy	\$60.00 Filing Fee, Certificate of Status &
		Solutions of Simus	(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
	MAILI	NG ADDRESS:	STREET/COURIER A	ADDRESS:
		tion Section	Registration Section	
	P.O. Box		Division of Corporation Clifton Building	8
		see, FL 32314	2661 Executive Center (Circle

Tallahassee, FL 32301

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

ARIS TAXI TRANSPORTATION 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	FLORIDA	_ and assigned
Florida document number L12000029010		•	_
	;; (•
This amendment is submitted to amend the following:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
A. If amending name, enter the new name of the limited liab	ility company here:		· · · · · · · · · · · · · · · · · · ·
	. g 20g	illiani di salah s	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company,"	the designation "LLC	or the abbreviation
Enter new principal offices address, if applicable:	3831 WEST VIN	E STREET	
(Principal office address MUST BE A STREET ADDRESS)	SUITE 58	3 7,	. ~
	KISSIMMEE, FL	34741	912
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3831 WEST VINI	E STREET	26
	KISSIMMEE, FL	34741	15
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		records, enter the	name of the new
Name of New Registered Agent:	<u> </u>	1	<u> </u>
New Registered Office Address:	· ,		
	Enter Florida street address		
	, Florida		
	City		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>	Address	Type of Action
MGRM	MARITZA RODRIG	GUEZ 2322 HIDDEN LAKE ST	Add
		SUEZ 2322 HIDDEN LAKE ST KISSIMMEE, EL 34741	✓ Remove
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D. If amer	iding any other information	n, enter change(s) here: (Attach additional sheets, if neces	isāry.)
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Dated	THRCH 23°	2012	
	+ Drimery		
	+ Painene	P 040011	
		le of a member or authorized representative of a member	* 1 - 5
	3	ARISMENDY ROSARIO	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00