

L12000032422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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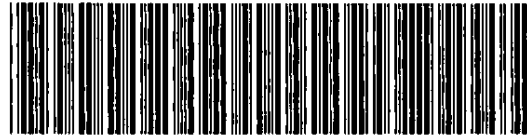
A

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SEP 13 2012

EXAMINER



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12 SEP 12 PM 21 01

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CCY TRANSPORTATION 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:

CARLOS SOSA

Name of Person

CARLOS SOSA

Firm/Company

1531 DREXEL RD #431

Address

WEST PALM BEACH FLORIDA 33417

City/State and Zip Code

CCYTRANSPORTATIONLLC@AOL.COM

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

For further information concerning this matter, please call:

CARLOS SOSA

Name of Person

at (561)

7229690

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 12 PM 2:01

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
CCY TRANSPORTATION LLC**

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 12 PM 2:01

The Articles of Organization for this Limited Liability Company were filed on FLORIDA and assigned
Florida document number L12000032422

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)

1531 DREXEL RD #431

WEST PALM BEACH FLORIDA 33417

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1531 DREXEL RD #431

WEST PALM BEACH FLORIDA 33417

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:

CARLOS SOSA

New Registered Office Address:

1531 DREXEL RD #431

Enter Florida street address

WEST PALM BEACH, Florida
City

FL 33417
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	NERCIDO LAMEDA <i>Remove</i>	1531 DREXEL RD #431 WEST PALM BEACH FLORIDA 33417	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	CARLOS SOSA <i>Add</i>	1531 DREXEL RD #431 WEST PALM BEACH FLORIDA 33417	<input type="checkbox"/> Add <input checked="" 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.)

I NEED TO REMOVE NERCIDO LAMEDA FROM THIS COMPANY AND ADD
CARLOS SOSA AT MGRM. THANKS

Dated SEPTEMBER 03, 2012

Signature of a member or authorized representative of a member

Carlos Sosa

Typed or printed name of signee