

L1200075868

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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(((H12000170105 3)))



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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : LAXMY'S CARRIER SERVICES
Account Number : 120040000007
Phone : (305) 640-0281
Fax Number : (305) 640-0282

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TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: LAXMYC2001@yahoo.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LUISITO BAIL BOND LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

A. LUNT

JUN 28 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LUISITO BAIL BOND 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:

LUIS LEDESMA

Name of Person

LUISITO BAIL BOND LLC

Firm/Company

7856 W 34TH CT

Address

HIALEAH, FL, 33018

City/State and Zip Code

LAXMYC2001@YAHOO.COM

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

For further information concerning this matter, please call:

LAXMY CHACON

Name of Person

at (305)

640-0281

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

RECEIVED
TALLAHASSEE, FLORIDA

2012 JUN 27 AM 5:27

FILED

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

LUISITO BAIL BOND 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 06/07/12 and assigned
Florida document number L12000075868

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 "LLC."

Enter new principal offices address, if applicable:

6555 NW 36TH ST S-201H

(Principal office address MUST BE A STREET ADDRESS)

VIRGINIA GARDENS, FL 33166

Enter new mailing address, if applicable:

6555 NW 36TH ST S-201H

(Mailing address MAY BE A POST OFFICE BOX)

VIRGINIA GARDENS, FL, 33166

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:

New Registered Office Address:

Enter Florida street address

City, Florida 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

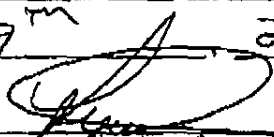
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<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

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

Article V: Please amend address to read
as follows: Luis Ledesma
6555 NW 36th St S-201 H
Virginia Gardens, FL, 33166

Dated June 27th 2012


MGRM

Signature of a member or authorized representative of a member

Typed or printed name of signee