## L12000127114

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SECRETARY OF STATE

J. BRYAN

OCT 28 2012

**EXAMINER** 

## **COVER LETTER**

Division of Co	orporations			
SUBJECT:	SHUTTLER EX	PRESS & SHOP L	LC.	
BODGECT:		ited Liability Company		
The enclosed Articles o	of Amendment and fee(s) are sul	omitted for filing.		
Please return all corresp	condence concerning this matter	to the following:		
•	M	LAGROS URDANETA	A	
		Name of Person	<del></del>	
	SHUTTL	ER EXPRESS & SHO	OP LLC.	
	<del></del>	Firm/Company		
	96	01 SW 142 AVE # 21	7	
		Address		TAPE T
		MIAMI FL 33186		
		City/State and Zip Code		SSE PR
		millieuf@gmail.com to be used for future annual rep	ort notification)	
For further information	concerning this matter, please	call:		FILED 2012 OCT 22 PM 1:51 SECRETARY OF STATE SECRETARY OF STATE
MILAG	ROS URDANETA	at ( 786 )	357-7097	P
Name	of Person	. 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 e	nclosed) Certified (	of Status &
МАТ	LING ADDRESS:	STREET/	COURIER ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

**Registration Section** 

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SHUTTLER EXPRESS & SHOP LLC.

(Name of the Limite)	A Florida Limited Liability Company)	s on our records.		
The Articles of Organization for this Limited I Florida document numberL1200012		CTOBER 04, 2012	and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability company her	<u>e</u> :		
	N/A	•		
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Compa	ny," the designation "LLC"	or the abbreviation	on
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)		PSE H	
			空 5	
			22 TARY ASS	
Enter new mailing address, if applicable:			mo 70	T
(Mailing address MAY BE A POST OFFICE BOX)			7:0 -	C
	, 		<u> </u>	
B. If amending the registered agent and registered agent and/or the new registered of		our records, <u>enter the 1</u>	name of the ne	₩.
Name of New Registered Agent:	N/A			
New Registered Office Address:			· · · · · · · · · · · · · · · · · · ·	
	Enter Florida street address			
	, Florida			
	City	Z	ip 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 **Type of Action Title** <u>Name</u> **Address** MGR **MILAGROS URDANETA** 9601 SW 142 AVE. ₽ Add # 217 Remove MIAMI, FL. 33186 ☐ Add Remove ☐ Add ☐ Remove ☐ Add Remove □Add Remove ∐Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A FRIDAY OCTOBER 19 2012 Dated Signature of a member or authorized representative of a member Kalina Morano Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00