

L12 000 142787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500243916795

01/28/13--01021--011 **30.00

FILED
2013 JAN 28 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 29 2013

T CLINE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AGILE CARRIERS, 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:

MARYA LABRADOR

Name of Person

AGILE CARRIERS, LLC

Firm/Company

1631 ROCK SPRINGS RD. PMB 363

Address

APOPKA, FL 32712

City/State and Zip Code

MARYALABRADOR@MITMAR.COM

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

For further information concerning this matter, please call:

MARYA LABRADOR

Name of Person

407 310-5704

at ()

Area Code & Daytime Telephone Number

2013 JAN 28 PM 1:44
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

AGILE CARRIERS, LLC

Page 1 of 3

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	MARYA LABRADOR	2760 GRASSMOOR LOOP	<input type="checkbox"/> Add
		APOPKA, FL 32712	<input checked="" type="checkbox"/> Remove
MGRM	JOEL LABRADOR	1631 ROCK SPRINGS RD.	<input checked="" type="checkbox"/> Add
		PMB 363	<input type="checkbox"/> Remove
		APOPKA, FL 32712	
			<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

FILED
2013 JAN 28 PM 1:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Dated January 15, 2013.

George M. Hobbs

Signature of a member or authorized representative of a member

Stacy H. Labrador

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 JAN 28 PM 1:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED