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COVER LETTER

TO: Registration Section Division of Corpor					
SUBJECT: Posi	tive taxi Name of Limite	UC. ed Liability Company		13	SE TAL
The enclosed Articles of Am	nendment and fee(s) are subr	nitted for filing.		SEP 12	CRETAI
Please return all corresponde	ence concerning this matter t	o the following:		2 P#	SEE.
-	Adilet Murat	bekou Name of Person		3: 22	FLORIDA
-		Enspectation and co	instraction	lle.	
-	93 Dune	Lakes Circle, Sant	a Rosa beach		
-	fl, 32459	City/State and Zip Code			
-	murathekovadi	obe used for future annual report notification	on)		
For further information conc			ouy		
Adilet Mural Name of Pe	Hoeko J irson	at (<u>%Co)</u> 2525 51 %. Area Code & Daytime Te	lephone Number		
Enclosed is a check for the fo	ollowing 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 Sta Certified Copy (additional copy	atus &	·d)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

positive taxi LLC.	SEC 13
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.)
The Articles of Organization for this Limited Liability Company v Florida document number 13 8 000 04448	12 SSE
This amendment is submitted to amend the following:	•
A. If amending name, enter the new name of the limited liabil	ity company here:
Positive transportation and constitution	ed Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	Santa Rosa beach PC 32453
(Principal office address MUST BE A STREET ADDRESS)	Santa Rosa beach PC 32453
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13800 Panama Crty beach parkway, Amit D106 # 244, Panaire City beach, PC
B. If amending the registered agent and/or registered office address here	
Name of New Registered Agent: Adiu	Murathekov g
New Registered Office Address: 90 Qu	ne lakes Crcle Santa Rosa beach
New Registered Office Address.	Enter Florida street address
·	, Florida 32459 City Zip Code
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre the provisions of all statutes relative to the proper and compl accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	ete performance of my duties, and I am familiar with and provided for in Chapter 608, F.S. Or, if this document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRN	Stupar Petar	320 Scenic Galf Dr. 224	Add
		Miramar beach, 32550, FL	Remove
MGRM	Cobvic Bojan	320 Scenic Gulf Dr 224	
		Miramor beach, Pl, 32550	Remove
MGR	Arslan Karishev	93 Dune Laker Grale,	Add
		Santa-Rosa beach Pl	Remove
		32459	
MGR	Janibek Dumbaeu	1110 lighthouse,	Add
		Panama Citybeach, FC.	Remove
`		32407	_
			TACLARED
			Remove 5 (08)(4)
	· .		_ \\ \times \\
			Remove

If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
 ited <i>O</i>	9,09.2013
	Signature of a member or authorized representative of a member Adilet Muratbekov
	Typed or printed name of signee

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Filing Fee: \$25.00

