

L130000012031

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

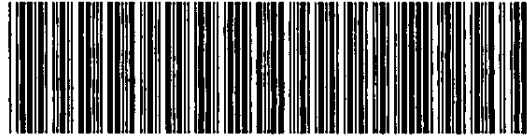
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Amend

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05/10/13--01016--007 \*\*25.00

FILED  
2013 MAY 10 AM 8:45  
JULIA A. HARRIS  
CLERK OF SUPERIOR COURT  
NORTH CAROLINA

J. SAULSBERRY  
EXAMINER  
MAY 13 2013

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CITY CAB ONE MIAMI FLORIDA 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:

WILNER PIERRE  
Name of Person

\_\_\_\_\_  
Firm/Company

6325 NE 2ND AVE # 205  
Address

MIAMI FL 33138  
City/State and Zip Code

WILNERPIERRE496@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILNER PIERRE at (786) 510-0002  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
2013 MAY 10 AM 8:45  
CLERK OF CIRCUIT COURT  
JUDICIAL CIRCUIT IN AND FOR  
DADE COUNTY, FLORIDA

CITY CAB ONE MIAMI FLORIDA 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 1/23/13 and assigned  
Florida document number L13000012031

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

~~ABC~~ CITY CAB ONE LLC

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)

2325 NE 2ND AVE #205  
MIAMI, FL 33138

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

AS ABOVE

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:

DAWORO AKHTAR

New Registered Office Address:

1735 NE 142ND AVE

Enter Florida street address

DAWORO@AMGROUP.US

MIAMI

Florida

33101

City

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.

[Signature]  
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>
DIRECTOR 1	GABRIEL BUTAIS	150 NE 120 ST MIAMI, FL 33161 <del>3000 90th</del>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
DIRECTOR 2	WILNER PIERRE	8262 NE 1st Ave # B MIAMI FL 33138	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MEMBER 1	CLAUSEL JEAN GILLES CLAUSEL	1934 RUDMAN ST. HOLLYWOOD FL 33022	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MEMBER 2	JEANEL CEREMY	12930 NW 21 AVE MIAMI, FL 33130	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MEMBER 3	PIERRE SOULOUQUE	14652 NE 14 AVE N. MIAMI, FL 33161	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MEMBER 4	MICHELET NOEL	16324 NE 8 AVE N. MIAMI BEACH, FL 33162	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**MGR = Manager**  
**MGRM = Managing Member**

SEC	DAVID AKHTAR	1735 MB 142 SI	<input checked="" type="checkbox"/> Add
		N. MIAMI, FL 33171	<input type="checkbox"/> Remove

2013 MAY 10 AM 8:45  
Add Remove

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

ALL SMART HOLDERS ARE AMENDED AND  
OWN EQUAL SMART. COULD BE REMOVED  
BY DIRECTOR 1 & 2 OR SECRETARY.

Dated MAY 6th, 2013

DIRECTOR 1 & 2 GABRIEL BUTOIS - WILL NERRE  
Signature of a member or authorized representative of a member

GABRIEL BUTOIS - WILL NERRE  
Typed or printed name of signee

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Filing Fee: \$25.00

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