

L 3000024920

(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:

Amere

Office Use Only



000250301720

08/12/13--0101U--006 **25.00

2013 AUG 12 AM 9:02
FILING OFFICE
TOLSON, MISSOURI

2013 AUG 12 AM 9:02

J. SAULSBERRY
EXAMINER
AUG 14 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Orlando US Transport 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:

Darwin E. Chirinos
Name of Person
Orlando US Transport LLC
Firm/Company
404 Brookfield DR
Address
Kissimmee FL 34758
City/State and Zip Code
edy4530@LifeLive.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Darwin E. Chirinos at (407) 928-9891
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 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

FILED
2013 AUG 12 AM 9:02
OFFICE OF THE
CLERK OF THE
SUPREME COURT
TALLAHASSEE, FL

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

(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 2-15-13 and assigned
Florida document number L13000024920

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

404 Brookfield DR
Kissimmee FL 34758

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

404 Brookfield DR
Kissimmee FL 34758

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

Florida

City

Zip Code

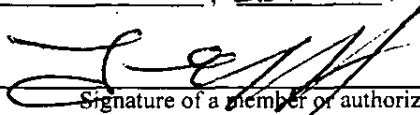
New Registered Agent's Signature, if changing Registered Agent:

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.

If Changing Registered Agent, Signature of New Registered Agent

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

Dated 7-22-, 2013



Signature of a member or authorized representative of a member

DARWIN F. CHIRINOS

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2013 AUG 12 AM 9:02
CLERK OF DISTRICT COURT
STATE OF FLORIDA