

L13000 103313

(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



500287513735

FILED
2016 JUL -5 AM 8:01
TALLAHASSEE, FLORIDA

07/06/16--01007--017

FILED
16 JUL -5 PM 5:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 06 2016

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Private Transportation 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:

Bogdan Kukharsky
Name of Person

Private Transportation LLC
Firm/Company

234 NE 3RD Street Suite UPH-4
Address

Miami, FL 33132
City/State and Zip Code

Bryan@privatetransportationllc.com
Email address: (to be used for future annual report notification)

FILED
STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FL
16 JUL -5 PM 5:06

For further information concerning this matter, please call:

Bogdan Kukharsky at () 305-915-7757
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 &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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

Private Transportation 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 07/22/2013 and assigned
Florida document number L13000103313.

This amendment is submitted to amend the following:

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

Private Transportation LLC

The new name must be distinguishable and contain 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)

234 NE 3RD STREET
SUITE UPH-4 Miami, FL 33132

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

234 NE 3RD STREET
SUITE UPH-4 Miami, FL 33132

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 605, 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

FILED
STATE
SECRETARY OF
TALLAHASSEE, FLORIDA
16 JUL -5 PM 5:06

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR Owner	Boqdan Kukharsky	234 NE 3RD Street	<input checked="" type="checkbox"/> Add
		Suite UPH-4	<input type="checkbox"/> Remove
		Miami, FL. 33132	<input type="checkbox"/> Change
MGR Owner	Karla Ruiz	234 NE 3RD Street	<input checked="" type="checkbox"/> Add
		Suite UPH-4	<input type="checkbox"/> Remove
		Miami, FL. 33132	<input type="checkbox"/> Change
Manager	Deborah Dinter	PO Box 402922	<input type="checkbox"/> Add
		Miami Beach FL. 33140	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
STATE
SECRETARY OF
TALLAHASSEE, FLORIDA
JUL 5 PM 5:06

16 JUL -5 PM 3:00

FILED STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
16 JUL -5 PM 5:06

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 6-29-16, _____

B. Kuss

Signature of a member or authorized representative of a member

Bogdan Kukharsky
Typed or printed name of signee

Typed or printed name of signee