# L13000137841

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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28 NOV - 7 PN 12: 28

## **COVER LETTER**

Division of Corporations
SUBJECT: Runner Taxi III LCC 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:
Ramon A. Rodniquez Name of Person
3058 Stillwater Dr.
Kissimmee F/34743
City/State and Zip Code  QaffordableServices Qamail. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ramon A. Rodriguez at (407) 452-4562  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed)  □ \$55.00 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

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2010 NOV -7 PM 12: 28 SECHLIANT OF STATE TALEAMASSEE, IT ORIDA

Runner Taxi III LC
(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 9 30 13 and assigned
Florida document number <u>L1300013784</u> ]
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here;  Best Runner vansportation  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)
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  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

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 **Title Address Type of Action** <u>Name</u> Remove

ted_	November 5, 2013.
.eu _	Rano Rodin
	Signature of a member or authorized representative of a member  Kamph A. Kodn que 2

Page 3 of 3

Filing Fee: \$25.00

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