Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140000405003)))



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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PALM BEACH 24/7 LIMO, LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
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Corporate Filing Menu

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TO:

Registration Section

COVER LETTER

Div	ision of Corpo	rations				
SUBJECT:	PALM BEA	CH 24/7 LIMO, LLC				
SUBJECT		Name of Limi	ted Liability Company			
The enclosed	l Articles of Ar	mendment and fee(s) are subr	nitted for filing.			
Please return	all correspond	lence concerning this matter (e the following:			
		Cheyenne Moseley				
			Name of Person			
		Legalzoom.com, Inc.				
			Firm/Company			
		100 W. Broadway Suit	e 100			
			Address	,		
		Glendale, CA 91210		Egg	2014	
			City/State and Zip Code	<u> </u>	FEB	
		cabmusic4ever@yahoo			8	(VALUE OF THE PARTY OF THE PART
		ti-mail address: (t	o he used for future annual report notifica	(noin)	9	
For further in	nformation con	cerning this matter, please ca	II:	(E) (L)	PH	
imelda Va	squez		323 962-8600 ext	17950	<u>:</u>	
	Name of P	crson	Area Code Daytime To	elephone Number	53	
Enclosed is a	a check for the	following amount:				
□ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fce & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclose		

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

PALM BEACH 24/7 LIMO, LLC				
(Name of the Limited Liab (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)		-	
The Articles of Organization for this Limited Liability Florida document number L13000176056	Company were filed on 12/23/2013	and	assign	ied
This amendment is submitted to amend the following:	·			
A. If amending name, enter the new name of the lit	mited liability company here:			
Security On the Go LLC				
The new name must be distinguishable and end with the words "I	Limited Liability Company," the designation "LLC"	or the abbreviation	n "L.I.,(C."
Enter new principal offices address, if applicable:		, , , , ,	62	
(Principal office address MUST BE A STREET ADL	(22 A C	(M)	===	
(Finisher Office and essings) Burishings		22.24	141	
	··			, GEODACE
en e malling all termitalities		<u> </u>	9	1
Enter new mailing address, if applicable:			3	
(Malling address MAY BE A POST OFFICE BOX)			<u>:</u>	-
		<u> </u>	: 53	The same
B. If amending the registered agent and/or reg	ristered office address on our records			the nes
registered agent and/or the new registered office ad		cuter the han	15 01	the act
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, Flori			
	City	Zip Coi	de	

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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Ma AMBR = At	R = Manager BR = Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			☐ Remove
			□ Add
			□ Remove
			☐ Remove
			Add 2014 A 20
			ASSET PHIZ: 5
			Add
			□ Remove

). If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
-	
-	,
-	
(The effo	ve date, if other than the date of filing:
Dated	2/10/14
	adallet Calallian
	Signature of a member or authorized representative of a member
	Adalberto Caballero
	Typed or printed name of signee

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Filing Fee: \$25.00

