

L14 000049594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

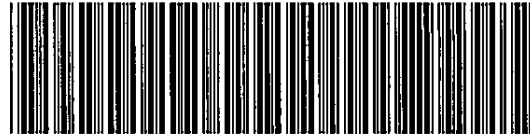
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Amend

Office Use Only



200263479382

09/08/14--01035--005 **25.00

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14 OCT -3 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~2009 OCT 3 2014~~

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Orlando Executive Transportation Group 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:

Henrisson Saint Louis

Name of Person

Orlando Executive Transportation Group LLC

Firm/Company

8015 International Drive suite #180

Address

Orlando, FL 32819

City/State and Zip Code

24hourschauffeur@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Henrisson Saint Louis

Name of Person

at **407 800-7700**

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 12, 2014

HENRISSON SAINT LOUIS
8015 INTERNATIONAL DRIVE STE 180
ORLANDO, FL 32819

SUBJECT: ORLANDO EXECUTIVE TRANSPORTATION GROUP LLC
Ref. Number: L14000049594

We have received your document for ORLANDO EXECUTIVE TRANSPORTATION GROUP LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch
Regulatory Specialist II

Letter Number: 914A00019620

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

Orlando Executive Transportation Group 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 03/26/2014 and assigned
Florida document number L14000049544.

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)

8015 International Drive suite# 180

Orlando, FL 32819

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:

Gilson Travis Mortimer

New Registered Office Address:

106 San Blas Ave

Enter Florida street address

Kissimmee

City

Florida 34743

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

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TALLAHASSEE, FLORIDA

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
--------------	-------------	----------------	-----------------------

MGR	Elcie Gustave	1615 sanibel drive	<input type="checkbox"/> Add
		kissimmee, FL 34741	<input checked="" type="checkbox"/> Remove

MGR	Gilson Travis Mortimer	106 San Blas Ave	<input checked="" type="checkbox"/> Add
		Kissimmee, FL 34743	<input type="checkbox"/> Remove

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TALLAHASSEE, FLORIDA

☐ Add

☐ Remove

☐ Add

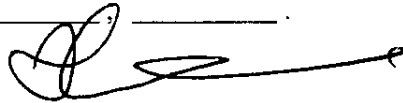
☐ Remove

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated _____



Signature of a member or authorized representative of a member

Henrisson Saint Louis

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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