114000065220

(Requestor's Name)
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04/30/14--01017--002 **25.00

B. BOSTICK
MAY 14 2014
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Upper Valet Parking 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:

GUSTAVO GAVIRIA

Name of Person

Upper Valet Parking LLC.

Firm/Company

1941 NE 31ST STREET 3

Address

LIGHT HOUSE POINT, FL 33064

City/State and Zip Code

GUSTAVO.GAVIRIA@ATT.NET

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

For further information concerning this matter, please call:

GUSTAVO GAVIRIA

954, 593-8886

Name of Person

Area Code

Daytime Telephone Number

Englosed 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Upper Valet Parking LLC.		
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L14000065220	were filed on <u>04/22/2014</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and end with the words "Limited Liabi		obreviation "L.L.C."
Enter new principal offices address, if applicable:	2223 SE 6" ST	reet
(Principal office address MUST BE A STREET ADDRESS)	2223 SE 6th St Suite #4	
	pompano Bch, 1	7. 32062
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	same as a	pove
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	ي وياه د اد ا
	, Florida	· . (.)
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agraprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am f provided for in Chapter 605, F.S. Or,	amiliar with and if this document is

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	GAVIRIA, GUSTAVO	1941 NE 31ST ST #3	a Add
		LIGHT HOUSE POINT, FL 33064	□ Remove
AMBR	DE LA CRUZ, JOSE	1941 NE 31ST ST #3	■ Add
		LIGHT HOUSE POINT, FL 3306	4 □ Remove
P	GAVIRIA, GUSTAVO	1941 NE 31ST ST #3	
		LIGHT HOUSE POINT, FL 33064	Remove
SEC	DE LA CRUZ, JOSE	1941 NE 31ST ST #3	Add
		LIGHT HOUSE POINT, FL 3306	4 _ ■ Remove
			A <u>Yu</u> d
		<u>.</u>	Remove
		:	— ○
		<u> </u>	□ Remove

D.	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)				
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	,				
E.	Effect (The eff	tive date, if other than the date of filing: (optional) fective date must be specific, cannot be prior to date of fecipt or filed date and cannot be more than 90 days after			
	the da	ate this document is filed by the Florida Department of State)			
	Dated	4/28/2014.			
		Signature of a member or authorized representative of a member			
		Gustano Garrira			
		Typed or printed name of signee			

Page 3 of 3

Filing Fee: \$25.00



May 6, 2014

GUSTAVO GAVIRIA 1941 NE 31ST STREET 3 LIGHTHOUSE POINT, FL 33064

SUBJECT: UPPER VALET PARKING LLC.

Ref. Number: L14000065220

We have received your document for UPPER VALET PARKING 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 effective date must be specific and cannot be prior to the date of filing.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 514A00009615