## \*14000162278

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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K.SALY EXAMINER OCT 29 2014



ACCOUNT NO.	: 12000000195
REFERENCE	: 350528 8018073
AUTHORIZATION	- Louis de man
COST LIMIT	
ORDER DATE : October 24, 2014	
ORDER TIME : 3:24 PM	
ORDER NO. : 350528-010	
CUSTOMER NO: 8018073	
DOMESTIC AM  NAME: SWIFT TRANS, L	ENDMENT FILING
EFFECTIVE DATE:	
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCO	RPORATION
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STA	NDING
CONTACT PERSON: Courtney Willi	ams EXT# 62935

EXAMINER'S INITIALS:

## **COVER LETTER**

то:	Registration Se Division of Cor			
elib ie	Swift Tra			
SUDJE	C1:		ted Liability Company	
The enc	losed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please r	eturn all correspo	ondence concerning this matter to	o the following:	
		Felix Bonilla		
			Name of Person	
		Swift Trans LLC		
			Firm/Company	
		43 Andros Rd		
			Address	······································
		Palm Springs, FL 3346	51	
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
		felixb1112@gmail.com		-11 ···
			be used for future annual report notifica	uon)
For furt!	her information c	oncerning this matter, please cal	11:	
Felix l	Bonilla		at () 249-9053 Area Code Daytime To	
	Name o	f Person	Area Code Daytime To	elephone Number
Enclose	d is a check for th	ne 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

FILED

2014 OCT 28 AM 9: 42

TALLAH TARY OF STATE

TALLAH TOSEE, FLORIDA

SWIFT TRANS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,	· SATILIA
The Articles of Organization for this Limited Liability Company	were filed on 10/17/201	4 and assigned
Florida document number L14000162278		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	vility Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	43 ANDROS ROAD	l
(Principal office address MUST BE A STREET ADDRESS)	PALM SPRINGS, F	L 33461
Enter new mailing address, if applicable:	43 ANDROS ROAD	
(Mailing address MAY BE A POST OFFICE BOX)	PALM SPRINGS, F	L 33461
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:		cords, enter the name of the new
New Registered Office Address:		
	Enter Florida street o	ıddress
		, Florida Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions 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 dution provided for in Chapter (	es, and I am familiar with and 605, F.S. Or, if this document is
If Char	nging Registered Agent, Signs	ature 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	Felix H. Bonilla	43 ANDROS ROAD	<b>=</b> Add
		PALM SPRINGS, FL 33461	□ Remove
AMBR	Felix H. Bonilla	605 N L ST	
		LAKE WORTH, FL. 33460	Remove
···			
			Remove T
			Remove TILL TILL TILL TILL TILL TILL TILL TIL
			DRomove: 2
			🗆 Add
			□ Remove
			□ Remove

f filing:	(optional)
	cannot be more than 90 days after
. 2014	
······································	
	f filing:

Page 3 of 3

Filing Fee: \$25.00

