

LI500005270

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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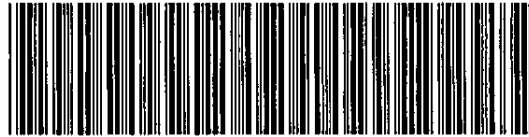
(Business Entity Name)

(Document Number)

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FILED  
15 JUN 25 PM 3:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 26 2015

J SHIVERS



## **J. KELLY KENNEDY**

Attorney/CPA, P.L.L.C.,  
A Partnership of P.L.L.C.'s  
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Winter Haven, FL 33880-3004



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#### **AREAS OF PRACTICE:**

Wills, Trusts, Estates, Estate Planning,  
Bankruptcy, Civil Litigation, Real Property Law,  
Taxation, Corporate and Business Law

#### **REPLY TO:**

PO Box 7604, Winter Haven, FL 33883-7604  
Tel: (863) 294-1114 Fax: (863) 294-8937  
Toll Free: 888-415-5019

June 23, 2015

State of Florida  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314-6327

RE: Aber Transportation, LLC

Dear Sirs:

Enclosed herewith for filing are Articles of Amendment for the above-captioned corporation. A copy of the Articles of Amendment to the Articles of Organization is also enclosed to be certified and returned to the undersigned.

Our firm's check in the amount of \$55.00 is enclosed to cover the following costs:

Filing Fee	\$25.00
Certified Copy	<u>30.00</u>

**Total \$55.00**

Thank you for your cooperation in this matter.

Sincerely,

J. KELLY KENNEDY, ATTORNEY/CPA, P.L.L.C.

J. KELLY KENNEDY, ESQUIRE

JKK/mig

Enclosures

xc: Aber Transportation, LLC

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** ABER TRANSPORTATION, 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:

J. KELLY KENNEDY, ESQUIRE

Name of Person

J. KELLY KENNEDY, ATTORNEY/CPA, P.L.L.C

Firm/Company

PO BOX 7604

Address

WINTER HAVEN, FL 33883-7604

City/State and Zip Code

GOTIT66@YAHOO.COM

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

For further information concerning this matter, please call:

J. KELLY KENNEDY, ESQUIRE

Name of Person

863

at ( )

Area Code

863-294-1114

Daytime Telephone Number

Enclosed 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**

ABER TRANSPORTATION, 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 01-09-15 and assigned  
Florida document number L15000005270.

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 contain 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)

3956 TOWN CENTER BLVD, #291

ORLANDO, FL 32837

**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:

FERNANDE J. MAZARD

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 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.*

*Fernande Joseph Mazard*

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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	PAUL, JEAN R	109 BERKSHIRE CIRCLE	<input type="checkbox"/> Add
		LONGWOOD, FL 32779	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	MAZARD, FERNANDE J	4854 ASHURST STREET	<input checked="" type="checkbox"/> Add
		KISSIMMEE, FL 34758	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MERELAN, MARIE E	124 DILLON WAY	<input checked="" type="checkbox"/> Add
		DAVENPORT, FL 33897	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MAZARD, EDWIN	4854 ASHURST STREET	<input type="checkbox"/> Add
		KISSIMMEE, FL 34758	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

15 JUN 25  
SECRETARY  
TALLAHASSEE

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated June 29, 2015

Fernande Joseph Nazard  
Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

Fernande Joseph Mazard

Typed or printed name of signee