LISOX	W95202	
(Requestor's Name) (Address) (Address)	700274040897	
(City/State/Zip/Phone #)	06/19/1501023019 **25.00	
(Business Entity Name) ·		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:	FILED SECRETARY OF STATE NVISION OF CORPORATIONS 15 JUN 20 PM 12: 27 SECRETARY OF STATE FALLAHASSEE, FLORIDA	
Office Use Only		
	JUN 22 2015 S MASON	
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June 18, 2015

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE: AJL Overseas LLC Request to Correct spelling of Manager/Registered Agent last name

Dear Sir or Madam:

The following is submitted to amend the name of the Registered Agent and Manager. Due to a clerical error the name was misspelled. The correct spelling is Carlos Seidl.

Please forward corrected Amendment to Articles of Organization to Carlos Seidl, 2800 Davie Road, Davie, Florida 33314.

Thank you in advance for your prompt attention to this matter.

Sincerely,

Carlos Seidl AJL Overseas, LLC

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		COVER LETTER
TO: Registration See Division of Corp		
AJL OVERS	EAS, LLC	
SUBJECT:	Name of Lin	nited Liability Company
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.
Please return all correspon	dence concerning this matter	to the following:
	CARLOS SEIDL	
		Name of Person
		Firm/Company
	2800 DAVIE ROAD	
		Address
	DAVIE, FL 33314	
	*	City/State and Zip Code
	SEIDLCARLOS18@GMA	IL.COM to be used for future annual report notification)
For further information co	e-man address. (
	teening this induce, prease of	
CARLOS SEIDL		at ()
Name of I	rerson	Area Code 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 & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Stat
Registrat Division P.O. Box	IG ADDRESS: ion Section of Corporations 6327 aee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AJU OVERSEAS, LLC (<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/01/2015 and assigned Florida document number 1.15000095202

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 distinguismable and contain the words. Unrited Unrited Unrited Company," the designation (14,C) or the abbreviation (1.1, 0, 1)

Enter new principal offices address, if applicable: (<u>Principal office address MUST BE A STREET ADDRESS)</u>		<u>,</u>	FALLAH	15 JUN	SECRET
Enter new mailing address, if applicable:		· · · ·	ASSEE, FL	20 PM	ARY OF S
(Mailing uddress MAY BE A POST OFFICE BOX)	··· <u> </u>	· · · · · · · · · · · · · · · · ·	ORIDA	2:27	RATIONS

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.	Carlos SEIDL	. ,
New Registered Office Address	<u>3900 DAVIE RUAD</u> Enter Floruda street address	and the second
		33314 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 hability company has been notified in writing of this change

If Changing Registered Agent Slangture Martin Registered August

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person, being added or renoved from our records:

MGR = Manager AMBR = Authorized Member

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Title	Name	Address	Type of Action
MGR	CARLOS SEIDE	2800 DAVIE ROAD	el Add
		DAVIE, FL 33314	🗆 Remove
			🛱 Change
MGR	CARLOS SIEDL	2800 DAVIE PLAS	🖸 Add
		DAVIE, FL 33314	E Remove
		· · · · · · · · · · · · · · · · · · ·	Change
	••	······································	El Add
			CI Remove
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			Change
	anna an	a an administrative and an an analysis and a supervised spaces of the second of the annual of the manual second	O Add
		TAL AH	SECRE
		AHASSEE EE	
• •		FLORIDA	

D. If afficulting any other information, enter change(s) here: Talitach additional sheets, if necessary i

purpose of this amendment is to corrat a NØ. spelling error in Murk's name. The context spelling is CARLOS SEIDL. _____ (optional) E. Effective date, if other than the date of filing: (It an effective date is listed, the date must be specific and cannot be prior to date of tiling 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. June 17 2015 Dated _____ Signature of a member or authorized representative of a membe CARLOS SEIDE Typed or printed name of signee Page 3 of 3 PH 12: 2 Filing Fee: \$25.00