

L15000099084

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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AUG 24 2015

M. MILLIGAN
EXAMINER

AUG 25 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LICAS TRANSPORT HOLDING 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:

ILEANA NOA

Name of Person

CONCORDE LAND TITLE SERVICES, INC.

Firm/Company

134 S. DIXIE HIGHWAY, SUITE #110

Address

HALLANDALE BEACH, FL 33009

City/State and Zip Code

INOA@CONCORDELTS.COM

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

For further information concerning this matter, please call:

ILEANA NOA

305 356-8403
at ()

Name of Person

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 &
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**

LICAS TRANSPORT HOLDING LLC

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

15
AUG 24 AM 11:06
FILED
CLERK OF CIRCUIT COURT
JANET L. HARRIS
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on JUNE 5, 2015 and assigned
Florida document number L15000099084.

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)

18851 NE 29TH AVE., #751

AVENTURA, FL 33180

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

18851 NE 29TH AVE., #751

AVENTURA, FL 33180

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:

JOSE LICATA

New Registered Office Address:

18851 NE 29TH AVE., #751

Enter Florida street address

AVENTURA,

City

Florida 33180

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

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	JOSE LICATA SR.	18851 NE 29TH AVE., #751	<input type="checkbox"/> Add
		AVENTURA, FL 33180	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	NICOLA CASTELLANO	18851 NE 29TH AVE., #751	<input type="checkbox"/> Add
		AVENTURA, FL 33180	<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
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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)

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

Dated AUGUST, 2015

Licata jori
Signature of a member or authorized representative of a member

JOSE LICATA

Typed or printed name of signee