[15000137473

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nai	me)
(Doc	cument Number))
Certified Copies	Certificate	s of Status
Special Instructions to F	Filing Officer:	





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COVER LETTER

Division of Co	prporations		
The Merli	in Bus Group LLC		
SUBJECT:	Name of Limited Liability	Company	
The enclosed Articles o	f Amendment and fee(s) are submitted for f	iling.	
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: Margarita M Vargas Name of Person The Merlin Bus Group LLC Firm/Company 8630 NW 5TER S101 Address Miami, Fl 33126 City/State and Zip Code Traveling@merlinbus.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Nestor Galiano Name of Person Name of Person Area Code Daytime Telephone Number			
	Margarita M Vargas		
	Name	of Person	
	The Merlin Bus Group LLC		
	Firm	Company	
	8630 NW 5TER S101		
	A	ddress	
	Miami, Fl 33126		
	•	and Zip Code	
		r future annual report notif	ication)
For firther information		Tuttire aimaar report notin	(cation)
		305 496 4099	
Name	of Person . A	rea Code Daytime	Telephone Number
Enclosed is a check for	the following amount:		
	4		D • < 0.00 PW P
□ \$25.00 Filing Fee	Certificate of Status Cert	10 Filing Fee & iffied Copy tional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

The Merlin Bus Group LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears Liability Company)	on our records.)
he Articles of Organization for this Limited I	Liability Company	were filed on	1/15 and assigned
orida document number L15000137473	·		
his amendment is submitted to amend the fol	lowing:		
. If amending name, enter the new name	of the limited liab	oility company her	<u>æ</u> :
he Merlin Bus Network "L.L.C"			
ne new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the de-	signation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		SAME	
rincipal office address MUST BE A STRE	ET ADDRESS)		
ter new mailing address, if applicable:		SAME	30
ailing address MAY BE A POST OFFICE	E BOX)		
			100 C
			22 P. F.
If amending the registered agent and			our records, enter the name of the r
gistered agent and/or the new registered o	office address her	<u>re</u> :	70 .
		7	5 2
Name of New Registered Agent:	Margarita M V	/argas	\/ ••
New Registered Office Address:	8630 NW 5 TI	ER #101	
		Enter Flori	da street address
	Miami		, Florida ³³¹²⁶
	· · · · · · · · · · · · · · · · · · ·	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.

1 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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>	Address	Type of Action
AMBR	Nestor Galiano	10700NW 7 ST #3 Miami, FL 331.	■ Add
			□ Remove
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Effective	e date, if other than the date of filing: (optional)	င်း	
(11 an erreci	ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pur the date inserted in this block does not meet the applicable statutory filing requirements, this date will	not be li	sted as t
	t's effective date on the Department of State's records.		
documen		the ear	lier of:
documen the reco The 9	t's effective date on the Department of State's records. rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t	the ear	lier of:
documen the reco The 9	t's effective date on the Department of State's records. rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on to do day after the record is filed.	the ear	lier of:
documen the reco The 9	t's effective date on the Department of State's records. rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on to do day after the record is filed.	the ear	lier of:

Page 3 of 3

Filing Fee: \$25.00