

L15000177061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300328062313

105-06/19--01025--002 * * * 101,001

FILED
2019 MAY -6 P 2:29
FBI - ALABAMA

1957 10 17

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TURTLE TRANS 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:

JUAN M LOPEZ
Name of Person
TURTLE TRANS LLC
Firm/Company
2900 WEST AVIARY DRIVE
Address
HOLLYWOOD, FLORIDA 33026
City/State and Zip Code
SERDAR @ MILESTONE PAVERS . COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SERDAR SOKELEN at (305) 778-7845
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

TURTLE TRANS LLC

2019 MAY -6 P 2:29

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

CLERK OF THE CIRCUIT COURT
HALL COUNTY, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 2/15/2019 and assigned
Florida document number 15000177061.

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)

3200 NW 67 AVENUE

BUILDING 7, UNIT 780

MIAMI, FLORIDA 33122

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3200 NW 67 AVENUE

BUILDING 7, UNIT 780

MIAMI, FLORIDA 33122

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:

SERDAR SOREVEN

New Registered Office Address:

3200 NW 67 AVE. BLD 7, UNIT 780

Enter Florida street address

MIAMI

City

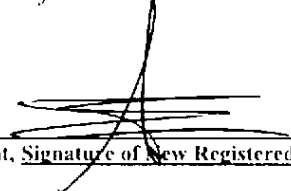
, Florida

33122

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	JUAN M LOPEZ	2900 WEST AVIARY DRIVE	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33026	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LIS E PORTUO	2900 WEST AVIARY DRIVE	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33026	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SERDAR SOKELEN	3200 NW 67 AVENUE	<input checked="" type="checkbox"/> Add
		BUILDING 7, UNIT 780	<input type="checkbox"/> Remove
		MIAMI, FL 33122	<input 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
			<input type="checkbox"/> Add
			<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:

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

Signature of a member or authorized representative of a member

JUAN M LOPEZ

Typed or printed name of signee