

L16000028/25

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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2016 MAR -7 AM 11:00
CLERK OF STATE
TALLAHASSEE, FL 09103

K. SALLY
EXAMINER

MAR - 9

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: EXCLUSA EXCLUSIVE 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:

JULIO GONZALEZ

Name of Person

Firm/Company

2223 ROUSE RD

Address

ORLANDO FLORIDA 32817

City/State and Zip Code

JULIOEXCLUSA@GMAIL.COM

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

For further information concerning this matter, please call:

JULIO GONZALEZ

786 295-4025
at (_____) _____
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" 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 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
2016 MAR -7 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EXCLUSA EXCLUSIVE 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 FLORIDA and assigned
Florida document number L16000028125.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

EXCLUSA EXCLUSIVE TRANSPORT LLC

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:

JULIO GONZALEZ EXCLUSA

(Principal office address MUST BE A STREET ADDRESS)

2223 ROUSE RD

ORLANDO FLORIDA 32817

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

JULIO GONZALEZ

New Registered Office Address:

2223 ROUSE RD

Enter Florida street address

ORLANDO

City

Florida 32817

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	JULIO GONZALEZ	2223 ROUSE RD ORLANDO FL :	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ROSA ROBINSON	2223 ROUSE RD ORLANDO FL :	<input checked="" 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"/> Change

FILED
 2016 MAR -7 PM 11:00
 DEPT. OF REVENUE
 TALLAHASSEE, FL 32309

2016 MAR 10 PM 10:00
FACILITY ACCESS
FACILITY OF ST. LOUIS

FILED
2016 MAR -7 AM 11:00
CLERK OF DISTRICT COURT
JULIA A. SELLER

(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.

Dated MARCH 2

2016

Signature of a member or authorized representative of a member

JULIO GONZALEZ

Typed or printed name of signee