

L16000041226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300311432303

04/04/18--01008--001 **25.00

FILED
2018 MAY -7 PM 12:36
STATE ARCHIVE OF FLORIDA
TALLAHASSEE FLORIDA

MAY 08 2018
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ECLAT LOGISTICAL MANAGEMENT, 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:

KWANE FRAZIER

Name of Person

ECLAT LOGISTICAL MANAGEMENT, LLC

Firm/Company

2771 MONUMENT ROAD #29-116

Address

JACKSONVILLE, FL 32225

City/State and Zip Code

KwaneFrazier6@gmail.com

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

For further information concerning this matter, please call:

KWANE FRAZIER

Name of Person

at (904)

Area Code

568-4436

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 5, 2018

KWANE FRAZIER
2771 MONUMENT ROAD #29-116
JACKSONVILLE, FL 32225

SUBJECT: E'CLAT LOGISTICAL MANAGEMENT, LLC
Ref. Number: L16000041226

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2018 MAY -7 PM 1:36

RECEIVED

We have received your document for E'CLAT LOGISTICAL MANAGEMENT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file an annual report with our office. Therefore, the document you submitted cannot be filed until the entity is reinstated on our records. The required reinstatement application, which takes the place of the annual report(s) due, must be submitted online at www.sunbiz.org. Simply click on the blue box entitled "File A Reinstatement Here!," which is located in the middle of our home page.

Once the reinstatement is submitted online, our system will allow you to choose one of three payment options. The three payment options are: 1. online by credit card; 2. online by pre-established Sunbiz E-File account; or 3. by mail with a check or money order. To pay online using a credit card, simply select the credit card option and enter your credit card information. Business entities with pre-established Sunbiz E-File accounts may choose the Sunbiz E-File account option. Entities paying by check or money order must select the check payment option, print the required payment voucher, and mail the check payment voucher with a check or money order made payable to the Florida Department of State for the total amount due.

If you choose to pay the required reinstatement fee(s) online using a credit card or Sunbiz E-File account, please contact me when the reinstatement filing has posted. If you choose to pay the required fee(s) by check or money order, please mail the check payment voucher and check or money order to my attention.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

2018 MAY -7 PM 12:34
TALLAHASSEE, FLORIDA

FILED

Jenna D Harris
Regulatory Specialist II

Letter Number: 018A00006934

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ECLAT LOGISTICAL MANAGEMENT, 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 02/26/2016 and assigned Florida document number L16000041226.

This amendment is submitted to amend the following:

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

ECLAT LOGISTICS, 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:

(Principal office address MUST BE A STREET ADDRESS)

2771 MONUMENT ROAD #29-116

Jacksonville, FL 32225

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2771 MONUMENT ROAD #

#29-116

Jacksonville, FL 32225

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:

KWAME FRAZIER

New Registered Office Address:

2771 MONUMENT ROAD #29-116

Enter Florida street address

Jacksonville

City

Florida 32225

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

FILED
MAY - 7
PM 12:39
SECRETARY OF STATE
TALLAHASSEE
FLORIDA

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins or other markings on the paper.

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.

Dated MARCH 26, 2018

Signature of a member or authorized representative of a member

KWANE FRAZIER

Typed or printed name of signee

Filing Fee: \$25.00

FILED
2018 MAY -7 PM 12:36
SOCIETY OF STATE
TALLAHASSEE FLORIDA