

Jul 11, 2017 4:15 PM  
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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (850) 617-6383

From:  
Account Name : PEREIRA LAW, P.A.  
Account Number : I20160000080  
Phone : (305) 821-5122  
Fax Number : (305) 362-9525

**\*\*Enter the email address for this business entity to be used for signature annual report mailings. Enter only one email address please.**

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
AXL, LLC

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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Jul 11, 2017 5:41PM

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### COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: AXL, 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:

Damaris Pereira, Esq.

Name of Person

Pereira Law, P.A.

Firm/Company

6500 Cow Pen Road, Suite 204

Address

Miami Lakes, FL 33014

City/State and Zip Code

dpereira@pereiraiawpa.com

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

For further information concerning this matter, please call:

Damaris Pereira

at (305) 821-5122

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

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

AXL, 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 03/03/2016 and assigned  
Florida document number L16000044442.

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:

7265 NW 74 Street

(Principal office address MUST BE A STREET ADDRESS)

Modley, FL 33166

Enter new mailing address, if applicable:

9155 S. Dadeland Blvd., Suite 1818

(Mailing address MAY BE A POST OFFICE BOX)

Miami, FL 33156

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:

Elias A. Chanur, Jr.

New Registered Office Address:

9155 S. Dadeland Blvd, Suite 1818

Enter Florida street address

Miami

Florida 33156

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.*

If Changing Registered Agent, Signature of New Registered Agent

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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	Elias A. Charur, Jr.	9155 S. Dadeland Blvd.	<input checked="" type="checkbox"/> Add
		Suite 1818	<input type="checkbox"/> Remove
		Miami, FL 33156	<input type="checkbox"/> Change
MGR	Laura C. Sharpe	9155 S. Dadeland Blvd.	<input checked="" type="checkbox"/> Add
		Suite 1818	<input type="checkbox"/> Remove
		Miami, FL 33156	<input type="checkbox"/> Change
MGR	Roxana Zedan	9155 S. Dadeland Blvd.	<input checked="" type="checkbox"/> Add
		Suite 1818	<input type="checkbox"/> Remove
		Miami, FL 33156	<input type="checkbox"/> Change
MGR	Axel Preuss-Kuhne	5201 Blue Lagoon Dr., Suite 936	<input type="checkbox"/> Add
		Miami, FL 33126	<input checked="" 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

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(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)

**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.

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 May 25, 2017

Signature of a member or authorized representative of a member

Elias A. ~~Charles~~, Jr.

Typed or printed name of signee

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