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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Airport & Limo Car Services 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:
Faraji Boutich
Name of Person
Firm/Company
4381 TreviCT # 308
Lake Worth, FL 33467
Lake Worth, FL 33467 Airportlimo Qyahoo.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Faraji Boutich at (501) \$ 541-1299 Name of Person Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solutional Copy (Solutional Copy tadditional Copy is enclosed) \$25.00 Filing Fee Solutional Copy (Solutional Copy tadditional Copy is enclosed) \$25.00 Filing Fee Solutional Fee, Certified Copy (Certified Copy tadditional 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

Airport & Limo Car Services 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 Liab Florida document number $\underline{110000}$ ($\underline{033}$	folity Company were filed on $3 30 2016$ 72 .	and assigned
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the Airport &	he limited liability company here: LIMO COT SETVIC ds "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	ele:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
registered agent and/or the new registered office Name of New Registered Agent:	registered office address on our records, <u>ente</u> <u>ce address here</u> :	r the name of the new
New Registered Office Address:	Enter Florida street address	77 Day
	, Florida _	
	City	Zip Code
	Carlot B.A. Carlot	

New Registered Agent's Signature, il 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>	Address	Type of Action
MGR	Natalie Boutich	4381 Trevi CT#308	` ⊠ ∧dd
		Lake Worth, FL 33467	- □ Remove
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tive date, if other than the date of filing: Tective date is listed, the date must be specific and cannot be prior to date of filing or n. If the date inserted in this block does not meet the applicable statutory filin nent's effective date on the Department of State's records.	nore than 90 days after filing.) Pursuant to 603
cord specifies a delayed effective date, but not an effective to 90th day after the record is filed.	time, at 12:01 a.m. on the earli
16/27/17 Mess	

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Filing Fee: \$25.00