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SECRETARY OF STATE
TALL AHASSEE FLORIO
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OCT 25 2016 **S. YOUNG** 



340 N. Westlake Blvd. | Suite 210 | Westlake Village, CA 91362

October 12, 2016

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**RE: SXM Limos and Cars LLC** 

To whom it may concern:

The Enclosed Articles of Amendment and Fee(s) are submitted for filing. Also, please find enclosed a check for state filing fees in the amount of \$25.00 made payable to the FL Dept of State. For information to this filing at the undersigned.

Thank you in advance and please return all correspondence in regards to this filing using the pre addresses stamped envelope included.

Sincerely,

Amanda J. Beren, Document Processor

CorpNet, Incorporated 888-449-2638 Ext. 105 aberen@corpnet.com



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## SXM Limos and Cars 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 9/28/2016 and assigned Florida document number $\underline{L16000181364}$ 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) 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: New Registered Office Address: Enter Florida street address

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

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
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		West Palm Beach, FL 33418	☐ Remove
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Dated	Signature of a member or authorized representative of a member	
	- Jest Simon	
	Signature of a member or authorized representative of a member	
	Pascal Gibert	

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Filing Fee: \$25.00