117000018383

(F	Requestor's Name)	
(F	Address)	
(F	Address)	
(0	City/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Nam	ne)
([Document Number)	
Certified Copies	Certificates	of Status
Special Instructions t	o Filing Officer:	
		:

Office Use Only



400307605124

02/16/19--01017--026 **25.00



WAR OF 20th HARRIS

COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE		VAN LINES LLC		
SUBJE	C1	Name of Lim	nited Liability Company	
The enc	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		RICO D. WILLIAMS		
			LINES LLC Name of Limited Liability Company Indiment and fee(s) are submitted for filing. Indiment and fee(s) are submitted for filing. Indiment and fee(s) are submitted for filing. Indicate of Status Name of Person Name of Person POYAGE VAN LINES LLC Firm/Company Address VINDERMERE, FL 34786 City/State and Zip Code WILLIAMS@VOYAGEVANLINES.COM E-mail address: (to be used for future annual report notification) Thing this matter, please call: 205 Area Code Daytime Telephone Number Iowing amount: \$30.00 Filing Fee & S55.00 Filing Fee & Gertificate of Status & Certificate of Status	
Name of Person VOYAGE VAN LINES LLC Firm/Company 1662 LAKE RHEA DR Address WINDERMERE, FL 34786				
			Firm/Company	
		1662 LAKE RHEA DR		
			Address	<u> </u>
		WINDERMERE, FL 347	86	
			City/State and Zip Code	
		-		
		E-mail address: (to be used for future annual report notifi	cation)
For furt	her information co	oncerning this matter, please ca	all:	
RICO I	D. WILLIAMS			
	Name of	f Person		Telephone Number
Enclose	d is a check for th	e following amount:		
\$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status		

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



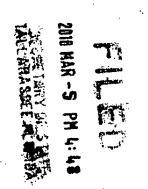
FLORIDA DEPARTMENT OF STATE Division of Corporations

February 19, 2018

RICO D WILLIAMS 1662 LAKE RHEA DR WINDERMERE, FL 34786

SUBJECT: VOYAGE VAN LINES LLC

Ref. Number: L17000018383



We have received your document for VOYAGE VAN LINES 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):

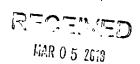
Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 718A00003476



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VOYAGE VAN LINES LLC				
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number L17000018383	were filed on 1/24/17	and assigned		
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	4630 S KIRKMAN RD #323			
• • •	ORLANDO, FL 32811			
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviate the 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 new mailing address on our records of				
	- S			
•	ORLANDO, FL 32811			
	· · · · · · · · · · · · · · · · · · ·	nter the name of the new		
ter new mailing address, if applicable: ailing address MAY BE A POST OFFICE BOX) ORLANDO, FL 32811 If amending the registered agent and/or registered office address on our records, enter the name of the nistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida				
	City, Florid	a Zip Code		
New Registered Agent's Signature, if changing Registered Agent:		•		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity. I furthe performance of my duties, and I provided for in Chapter 605, F.S.	am familiar with and Or, if this document is		

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>	Type of Action
MGR	RICO D. WILLIAMS	1662 LAKE RHEA DR	■ Add
		WINDERMERE, FL 34786	□ Remove
			Change
			Add
			□ Remove
			Change
			□ Add
			□ Remove
		Adv	□ Change
			Add
			☐ Remove
			≥ □ S ange
			A DATE OF THE PROPERTY OF THE
			□ Remo (c.
		· 	hange
			□ Add
			□ Remove
			☐ Change

						-		_
								_
			•		***			-
			-		.			_
,								_
								_
			-					_
			***		¥ -0			_
								_
		 						_
								_
								_
								_
								_
						***		-
Effective date, if other than th	ne date of fili	ng:			(option	al)		
f an effective date is listed, the date m	ust be specific a	nd cannot be pri	or to date of fil	ng or more than	90 days after fil	ing.) Pursua	ent to 60)5.0207
Note: If the date inserted in this document's effective date on the				ry ming requi	rements, this d	ate will no	n de ns	neu as
ne record specifies a delay			not an effe	tive time, a	at 12:01 a.ṛ	n. on the	e earl	ier of
The 90th day after the re	ecord is filed	1.			·	33. ;	~ 2	
2/11		2018				7	2018	40-6-5)
Dated	· · · · · · · · · · · · · · · · · · ·	_,	·			2 3	MAR	1
						***	3 0	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00