# L17000054983

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# **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: IN TEAL	IMPORT AND I	XPORT LLC
Name of	Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are	submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
JOHN	O. DBA NAO Name of Person	
IN THA	Firm/Company	EX PORT LLC
~750 5	S.W. 16 ST. M1 Address	AM', FL
7701	MIAMI FL City/State and Zip Code  13 FNTY O YAH  ss: (to be used for future annual report notifi	33/45 LDO, COM.
E-mail addre	ss: (to be used for future annual report notif	ication)
For further information concerning this matter, pleas	se call:	
JOHN J. OBANDO  Name of Person	at ( <u>786</u> ) <u>290 e</u> Area Code <u>Daytime</u>	OF 4   Telephone Number
Enclosed is a check for the following amount:		
\$25.00 Filing Fee S25.00 Filing Fee & Certificate of Status	S55.00 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/COURTER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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  $\frac{D3}{17}\frac{17}{17}$  and assigned Florida document number  $\frac{L17000054983}{17}$ 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 "LLC." 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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
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Filing Fee: \$25.00