L170000 61079

(Requestor's Name)
(Address)
(Address)
(Addicas)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entry Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

Division of Cor	porations		
· US SWIFT SUBJECT:	TEAM LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for tiling.	
Please return all correspo	ondence concerning this matter	to the following:	
	Mary La Chiusa		
		Name of Person	
	Cashwell Accounting Inc		
		Firm/Company	·.
	953-10th Street		
		Address	
	CLERMONT, FL 34711		
	mary@cashwellaccounting.	City/State and Zip Code com	
	E-mail address: (to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	ıll:	
Mary La Chiusa		352 242-1001 at ()	
Name o	of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	he 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:

TO:

Registration Section

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

US SWIFT TEAM LLC	2	
(<u>Name of the Limited Liability C</u> i (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Com L17000061039 Elorida document number	pany were filed on 03/16/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited</u>	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES.	<u>S)</u>	
		66 17 2
		CHE SION
Enter new mailing address, if applicable:		2 95 S
(Mailing address MAY BE A POST OFFICE BOX)		ORP
		8. A. S. J.
		- 10°
B. If amending the registered agent and/or registere	•	
registered agent and/or the new registered office address	s here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da
	Cirv	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

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 Name	Address	Type of Action
MGR	SASA MARVIN	3501 EMERALD POINTE DR	
		APT 206B	☐ Remove
		HOLLYWOOD, FL 33021	☐ Change
MBR	KEITH EDWARD DOYNE	263 NORTH 61ST STREET	
		HARRISBURG, PA 17111-4310	□ Remove
			☐ Change
			□ Remove
			Change
			Add
			Remove
			Change
			
			Remove
			Change
			
			□ Remove
			☐ Change

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ective date, if other than the dat effective date is listed, the date must be:	e of filing:	ste of filing or more than	(optional)	nt 10 605 0
te: If the date inserted in this block a nument's effective date on the Department.	does not meet the applicable			
record specifies a delayed eft he 90th day after the record		n effective time, a	t 12:01 a.m. on the	earlier
HOLLYWOOD, FL	05-18-2018			
\overline{Q} , c				
1 chans	ature of a member or authorize			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00