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(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: EXClusive Auto Transportation 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:
Joncothan De Jasus Velazguez Name of Person
Exclusive Auto Transportation (CC Firm/Company
ZII NE 11th Street
Nelray Branch FL, 33444 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jonathan R Jesus Velazyuez at (561) 573-5776 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{S30.00 Filing Fee & Certificate of Status} \Bigcup \$55.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Copy (additional 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

EYCLUSING F	tito Ira	nsportati	on ω			
(Name of the Limited (A						
The Articles of Organization for this Limited Liab	oility Company v	were filed on	7/13/1	18	_ and assign	ed
This amendment is submitted to amend the follow						
A. If amending name, enter the new name of the	he limited liabil	ity company he	<u>re</u> :			
The new name must be distinguishable and contain the word	ds "Limited Liabilii	y Company," the de	esignation "LI.	.C" or the abbre	viation "L.L.C	
Enter new principal offices address, if applicab	ıle:					9
(Principal office address MUST BE A STREET.	ADDRESS)			• • • •		1SICE SECTION
			···		<u>-</u> _	<u> </u>
Enter new mailing address, if applicable:					6 24	CORPORATIONS
Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>				ယ္	AIA
			***		ř	<u> 3</u> K0
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address bere:	ice address on	our record	ls, <u>enter th</u>	e name of	the nev
Name of New Registered Agent:	Jonath	ian Dc Je 11th Street	sus Veli	ezquez		
New Registered Office Address:	JII NE	11th Street	et .	· · · · · · · · · · · · · · · · · · ·		
New Production of Association (Charles and Control of C	Delray	beach City	da street addre		3444 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

Page 1 of 3

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
MOR	Kevin Gathric SR	162 Fernwood Crescent	
		162 Fernwood Crescent Loyal Palm, FL 53411	Remove
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	Please	change	the	MGR	to	Jonathan	DeJesus	Veluz	guez
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F.G.	tivo data il	f other than t	he date c	of filing:			(op	tional)	
(If an e	ffective date is If the date	s listed, the date r inserted in this	nust be spe block doe	cific and canno es not meet th	n be prioi ne applio	able statutory filing	nore than 90 days at ng requirements, t	ter filing.) Pi this date wi	arsuant to 605. Il not be liste
docu	ment's effect	tive date on the	Departm	ent of State's	records				
f tha r	ecord snec	rifies a delay	ed effe	ctive date.	but no	ot an effective	time, at 12:0:	1 a.m. or	the earlie
b) Th	e 90th da	y after the r	ecord is	filed.					
	d	1/2/18			さい	ly 13th	,2013		
Date	d	13/10	1	,	1	L·	•		
			/mE	ure of a month	er or and	horized representative	ve of a member		
		/	Signat	ure or a memo		nonzea rejussamen			

Page 3 of 3

Filing Fee: \$25.00