118000080424

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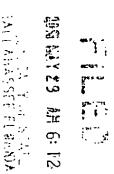
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COVER LETTER

	tion Section of Corporations	·	
our recor	School Bus Services of	Manatee County, LLC	
SUBJECT:	Name of Limited	H.iability Company	
The enclosed Arti	cles of Amendment and fee(s) are submit	tted for filing.	
Please return all c	orrespondence concerning this matter to	the following:	
	Corie Holmes		
		Name of Person	
	School Bus Se	ervices of Manatee County, LI	LC
		Firm/Company	
	6109 64th Drive East		
		Address	
	Palmetto, FL. 34221		
	Holmescm@hotmail.com	City/State and Zip Code	
	E-mail address: (to b	e used for future annual report noti	fication)
For further inform	ation concerning this matter, please call:		
Corie Holmes		941 776-7789	
	Name of Person		e Telephone Number
Enclosed is a che-	k for the 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:

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

	တ် Manatee County LLC ,
(<u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com Florida document numberL18000080424	pany were filed on May 14, 2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	I liability company here:
Can you please change remove comma after LLC Thank	you 😅 🍇
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:	2316 72nd Avenue East Sarasota, FL 34243
(Principal office address MUST BE A STREET ADDRES	(S) (S) (S) (S)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6109 64th Drive East Palmetto, FL. 34221
B. If amending the registered agent and/or registered registered agent and/or the new registered office address Name of New Registered Agent: No Change	
Mary Barristanad Office Address	
New Registered Office Address:	Enter Florida street address
	Florida
	City 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Lisa Durrance	3880 Ironwood Lane	
		Bradenton, FL 34209	Remove
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			Remove
			□ Change
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			Remove
		-	☐ Change
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		July 1, 2018			
fective date, if other	r than the date of fi	ılıng:	of filing or more than 90 days	optional)	030
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ecument's effective da	ite on the Department	of State's records.			
	a delayed effectiver the record is file		effective time, at 12:	01 a.m. on the earlie	ir o
The soul day are	in the record is the	su.			
July 1.		2018			
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 	Signaturer	I a member or authorized	representative of a member		
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	Caria Halman			· 17)	
	Corie Holmes				- {
	Cone Holmes	Typed or printed nam	e of signee	5 6 F	- 1

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Filing Fee: \$25.00