L18000168194

(Re	questor's Name)	
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DIVISION OF CORPORATION

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COVER LETTER

TO:	Registration Se Division of Cor			
		Transit LLC		
SUBJE	CT:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are subsondence concerning this matter	-	
		Alberto Vasquez		
			Name of Person	
		Beachside Transit LLC		
			Firm/Company	
		601 N 21st Avenue		
		<u> </u>	Address	
		Deerfield Beach, FL33441		
		alvasquez1200@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notifi	ication)
For furt	her information c	oncerning this matter, please ca	ill:	
Alberto	Vasquez		570 589-1200	
·	Name o	f Person	at ()	Telephone Number
Enclose	d is a check for t	he following amount:		
52 \$2 5	.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

Beachside Transit LLC	ty Commany as it now appears on our records)	
(A Florida	ty Company as It now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number 1.18000168194	ompany were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		66
(Principal office address MUST BE A STREET ADDI	(ESS)	
		2 97AR
Enter new mailing address, if applicable:		PH PH
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Floric	ria

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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Johnathan Perez	4512 Monarch Way	
		Coconut Creek, FL 33073	Remove
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		PH 2: 1.
an effective date is listed, the date mu lote: If the date inserted in this bl	date of filing:	(optional) ore than 90 days after filing.) Pursuant to 605.020 g requirements, this date will not be listed a
e record specifies a delayed The 90th day after the rec	l effective date, but not an effective to ord is filed.	ime, at 12:01 a.m. on the earlier
July 23rd	2018	
ated	<u></u>	
ار	√h	
	Signature of a member or authorized representative	of a member

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Filing Fee: \$25.00