

48000195715

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

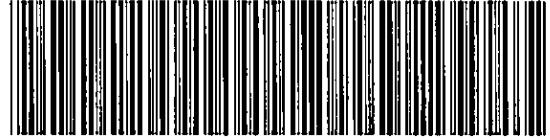
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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OCT 15 2018

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18 OCT 15 AM 10:28
FILING CLERK PCA

SIMMONS
OCT 20 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MANNY TRANS 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:

MANUEL VERDECIA

Name of Person

MGR

Firm/Company

1830 GOLDEN GATE BLVD E

Address

NAPLES, FL 34120

City/State and Zip Code

INFO@DIRECTSOLUTIONSERVICES.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MANUEL VERDECIA

239 849-0574
at (_____) _____
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check 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**

MANNY TRANS LLC

(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 FLORIDA and assigned Florida document number L18000195715.

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 "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3603 8TH AVE NE

NAPLES, FL 34120

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3603 8TH AVE NE

NAPLES, FL 34120

FILED
NOV 15 AM 10:28
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF
SANTA LUCIA, FLORIDA

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:

RAUDEL RODRIGUEZ TORRES

New Registered Office Address:

3603 8TH AVE NE

Enter Florida street address

NAPLES

City

Florida 34120

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, 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>	<u>Address</u>	<u>Type of Action</u>
MGR	MANUEL VERDECIA	1830 GOLDEN GATE BLVD E	<input type="checkbox"/> Add
		NAPLES, FL 34120	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	RAUDEL RODRIGUEZ TORRES	3603 8TH AVENUE	<input checked="" type="checkbox"/> Add
		NAPLES, FL 34120	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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