

L180000276677

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

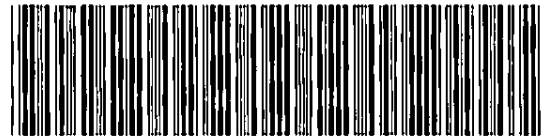
(Business Entity Name)

(Document Number)

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FILED  
2018 DEC -4 PM 4:53  
SECRETARY OF STATE  
TALLAHASSEE FL 32399

12/05/18--01002--011 \*\*25.00

18 DEC -4 PM 4:35  
TALLAHASSEE FL 32399

SP 12/4/18

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: AnyTIME VIP 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:

Abdool M. Shakur  
Name of Person

Anytime ViP Transportation LLC  
Firm/Company

910 Belhaven Dr  
Address

Orlando, FL 32828  
City/State and Zip Code

asifshakur@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Abdool M. Shakur at (321) 305-9179  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |                                                        |                                                                        |                                                                                                  |                                                                                                                            |
|--------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

Anytime VIP Transportation 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 11-30-2018 and assigned  
Florida document number L18000276677

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

910 Belhaven Dr  
Orlando, FL 32828

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

910 Belhaven Dr  
Orlando, FL 32828

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:

Abdool M. Shakur

New Registered Office Address:

910 Belhaven Dr

Enter Florida street address

Orlando, Florida 32828  
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.*

Abdool M. Shakur  
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>
<u>Pres</u>	<u>Bebe R. Yasin</u>	<u>7521 Solstice circle</u>	<input type="checkbox"/> Add
		<u>Orlando, FL 32828</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
<u>Treas</u>	<u>Bebe R. Yasin</u>	<u>15520 Laguna RD</u>	<input checked="" type="checkbox"/> Add
		<u>Clermont FL 34711</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>Reg. Agent</u> <u>V/P</u>	<u>Sagid A. Yasin</u>	<u>7521 Solstice circle</u>	<input type="checkbox"/> Add
		<u>Orlando, FL 32821</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>Pres</u> <u>V/P</u>	<u>Abdool M. Shaker</u>	<u>910 Belhaven Dr</u>	<input type="checkbox"/> Add
		<u>Orlando, FL 32828</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
<u>Treas</u>	<u>Abdool M. Shaker</u>	<u>910 Belhaven Dr</u>	<input type="checkbox"/> Add
		<u>Orlando FL 32828</u>	<input checked="" type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 12-04-2018, \_\_\_\_\_

Signature of a member of authorized representative of a member

Abdool M. Shakur  
Typed or printed name of signer

FILED  
2010 DEC -4 PM 4:53  
CLERK OF DISTRICT COURT  
JANUARY 11, 2011  
ALLIANCE FOR THE  
STATE OF TEXAS