

L190000 15330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700324490877

02/13/19--01017--021 **25.00

2019 FEB 13 AM 10:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 18 2019
C McNAIR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COCO AUTO TRADING, LLC

Name of Limited Liability Company

2019 FEB 13 AM 10:33
RECEIVED
TALLAHASSEE, FL 32301

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Olivencia, JSM

Name of Person

Professional Accounting Group, LLC

Firm/Company

PO Box 622521

Address

Orlando, FL 32862-2521

City/State and Zip Code

david@professionalaccountinggroupll.com

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

For further information concerning this matter, please call:

David Olivencia, JSM

407 207-5509

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

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**

2019 FEB 13 AM 10:34

COCO AUTO TRADING, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

~~SECRETARY OF STATE~~
~~TALLAHASSEE, FLORIDA~~

The Articles of Organization for this Limited Liability Company were filed on 01/11/2019 and assigned
Florida document number L19000015330.

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

Enter new principal offices address, if applicable:

1431 N Main Street

(Principal office address MUST BE A STREET ADDRESS)

Kissimmee, FL 34744

Enter new mailing address, if applicable:

4984 London Creek Place

(Mailing address MAY BE A POST OFFICE BOX)

Kissimmee, FL 34758

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:

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, 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>
MGM	Nolberto Fernando	4984 London Creek Place	<input checked="" type="checkbox"/> Add
		Kissimmee, FL 34758	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGM	Mercedes Aponte	4984 London Creek Place	<input checked="" type="checkbox"/> Add
		Kissimmee, FL 34758	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated January 11 2019

Fernando Nolberto

Page 3 of 3

Filing Fee: \$25.00