

U9000193149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

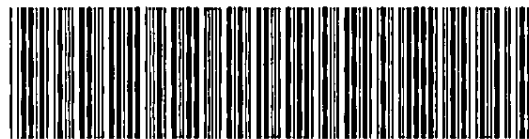
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/19/20--01002--004 **25.00

FILED
OFFICE OF STATE
CORPORATIONS
OCT 13 2012 4:00

Amend/Name Change

10/19/20

2

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MY RIDESHARE SERVICES L.L.C.

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:

Adam W DeBoer

Name of Person

MY RIDESHARE SERVICES

Firm/Company

824 N J Street

Address

Lake Worth, FL 33460

City/State and Zip Code

adaforebay@yahoo.com

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

For further information concerning this matter, please call:

Adam W DeBoer

561 5029162
at ()

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 &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED
CLERK OF CIRCUIT COURT
JULY 11, 2013
TALLAHASSEE, FL
20 OCT 13 PM 12:40

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MY RIDESHARE SERVICES L.L.C.

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

STATE OF FLORIDA
CLERK OF THE COURT
20 OCT 13 PM 12:40

The Articles of Organization for this Limited Liability Company were filed on 07/19/2019 and assigned
Florida document number L19000186149.

This amendment is submitted to amend the following:

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

ADAM WESTLY LLC

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)

711 Gotham Ct. Apt B

West Palm Beach, FL 33405

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

711 Gotham Ct. Apt B

West Palm Beach, FL 33405

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:

711 Gotham Ct. Apt B

Enter Florida street address

West Palm Beach

City

Florida 33405

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

[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.

Adam W De Boer
Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00