

L20000302171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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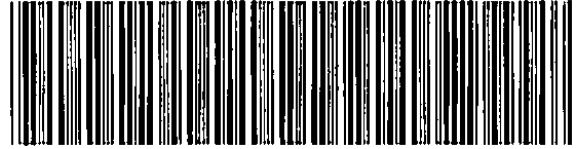
(Business Entity Name)

(Document Number)

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2029 NOV 16 AM 10:54
STATE
CLERK
JULIA M. B. F.

O SIMMONS
DEC 21 2020

TO: Registration Section
Division of Corporations

SUBJECT: JKD LUXURY 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:

AGUIRRE, CLAUDIA P, MR

Name of Person

JKD LUXURY TRANSPORTATION LLC

Firm/Company

2 NE 160 St

Address

Miami, FL 33162

City/State and Zip Code

ricardomoreno470@gmail.com

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

For further information concerning this matter, please call:

Hernan R. Moreno

786

515-4662

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 Address:

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

LED

2020 NOV 16 AM 10:55

(A Florida Limited Liability Company) 55,000 STATE
 BUILDING, SUITE 100
 MIAMI, FL 33130

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR = Authorized Member

FILED

2020 NOV 16 AM 10:54

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of</u>
MR	CLAUDIA P. AGUIRRE	2 NE 160 ST MIAMI, FL 33162	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remo
			<input type="checkbox"/> Chang
Manager	CLAUDIA P. AGUIRRE	2 NE 160 ST MIAMI, FL 33162	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remo
			<input type="checkbox"/> Chang
SR	HERNAN R. MORENO	2 NE 160 ST MIAMI, FL 33162	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remov
			<input type="checkbox"/> Chang
Manager	HERNAN R. MORENO	2 NE 160 ST MIAMI, FL 33162	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remov
			<input type="checkbox"/> Change
SR	JUAN C MORENO	2 NE 160 ST MIAMI, FL 33162	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Manager	JUAN C MORENO	2 NE 160 ST MIAMI, FL 33162	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

2020 NOV 16 AM 10:54

STATE OF FLORIDA
TALLAHASSEE, FL

E. Effective date, if other than the date of filing: 11/10/2020 (optional)

(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

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

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 November 10, 2020

X

Signature of a member or authorized representative of a member

Juan C. Moreno

Typed or printed name of signer