

K22000183973

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(Address)

(Address)

(City/State/Zip/Phone #)

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2022 JUN 16 PM 1:10
SICILIANO OF SM
TALLAHASSEE, FL

FILED

TO FLORIDA DEPARTMENT OF STATE

RE : AMENDMENT FOR BAY ISLANDER EXPRESS LLC

FM : JEAN AUGUSTIN , REGISTERED AGENT

LADIES & GENTLEMEN

THIS AMENDMENT FOR BAY ISLANDER EXPRESS IS ABOUT
CORRECTING A MISTAKE ON THE NAME OF THE OWNER RICKY R
CONNOR .- THE NAME FILED RICKY R RANDALL IS INNACURATE
BECAUSE THE MIDDLE NAME INITIAL R STANDS FOR RANDALL.
THANK YOU FOR YOUR CONSIDERATION

BEST REGARDS


JEAN AUGUSTIN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BAY ISLANDER EXPRESS 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:

RICKY R CONNOR

Name of Person

BAY ISLANDER EXPRESS

Firm/Company

5660 NW 5TH CT

Address

MIAMI FLORIDA 33127

City/State and Zip Code

HAITIPROMOADS@YAHOO.COM

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

For further information concerning this matter, please call:

RICKY R CONNOR

305 502-6901

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

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

FILED

2022 JUN 16 PM 1:10

BAY ISLANDER EXPRESS LLC

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

CLERK OF CIRCUIT COURT
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on APRIL 18TH 2022 and assigned
Florida document number L22000183973.

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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>
MGR	RICKY R RANDALL	5660 NW 5H CT MIAMI FLORIDA 33127	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	RICKY R CONNOR	5660 NW 5TH CT MIAMI FLORIDA 33127	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

2022 JUN 16 PM 1:10
STELLA AND JIM SHANE
TALLAHASSEE FL

77777

E. Effective date, if other than the date of filing: _____ (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 (3)(b)

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.

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 MAY 17 2022

Richard L. Thompson

Name of authorized signatory

Signature of a member or authorized representative of a member

RICKY R CONNOR

Typed or printed name of signee

Filing Fee: \$25.00