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(Ke	equestor's Name)	
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PICK-UP	MAIT WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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2022 SEP -2 PH 12: 38 SECRETARY OF STATE TALLAHASSEE, FL



August 29, 2022

Florida Department of State Division of Corporations

To Whom It May Concern:

Attached are the required documents to add Sebastian Arregoces as an authorized member of the company. Should you require any additional information, please feel free to reach out via phone at 954-854-4394. The return address associated with this transaction is 7760 NW 11th Place, Plantation, FL 33322.

Thank you

Respectfully,

Signature Buses LLC

## **COVER LETTER**

Division of Cou	RE BUSES LLC			
SUBJECT:		ited Liability Company	<del></del>	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	SEBASTIAN ARREGOC	ES AND ELIZABETH ARREGOCES		
		Name of Person	-	
	SIGNATURE BUSES LL	C		
	<del></del>	Firm/Company	<del></del>	
	7760 NW 11TH PLACE			
	Address			
	PLANTATION, FL 33322			
		City/State and Zip Code		S 29
	INFO@SIGNATUREBUS. E-mail address: (	ES.COM to be used for future annual report notification	)	22 SE ECR
For further information c	oncerning this matter, please co	all:		P-S
SEBASTIAN ARREGO	CES	954 854-4394 at ( )		SEP -2 PHIC SEP -2 PHIC SETARY OF ALLAHASSET
Name o	f Person	Area Code Daytime Telep	hone Number	2022 SEP -2 PH 12: 38 SECRETARY OF STATE SECRETARY OF STATE TALLAHASSEE, FL
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop (additional copy	f Status & py
Mailing Addres	<u>ss:</u>	Street Address:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

**Registration Section** 

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

SIGNATURE BUSES LLC		
(Name of the Limited Liability (A Florida l	Company as it now appears on our record Limited Liability Company)	<u>ls.</u> )
The Articles of Organization for this Limited Liability Co	ompany were filed on 7/27/2022	and assigned
Florida document number L22000331856	_:	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	red Liability Company," the designation "LLC	" or the abbreviation "L.4C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRI	ESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter	the name of the new register
Name of N. J. D. Carlot J. A. Jan		
Name of New Registered Agent:		
New Registered Office Address:	r m	
	Enter Florida strect addre:	58
		orida
	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 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>	Address	Type of Action
AMBR	SEBASTIAN ARREGOCES	1701 NW 75TH AVENUE APT 209	<b>≣</b> Add
		PLANTATION, FL 33313	_
			□Change
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E. Effective date, if othe	er than the date of filing:		(optional)	
(If an effective date is listed, Note: If the date inserte	the date must be specific and cannot be d in this block does not meet the te on the Department of State's re-	applicable statutory fi	more than 90 days after filing.) F	Pursuant to 605.0207 (3)(bill not be listed as the
If the record specifies a delagrecord is filed.	yed effective date, but not an effe	ctive time, at 12:01 a.n	n, on the earlier of: (b) The	90th day after the
Dated	2022			
<i>(</i> )(	Ezabethi Decce	DCC J or authorized representati		
	// Signature of a member/	or authorized representati	ive of a member	<del></del>

Typed or printed name of signee