

L23 000 357 349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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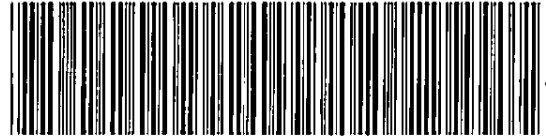
(Business Entity Name)

(Document Number)

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2024 JAN -3 PM 12:20

1/20/2024

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Beep Beep Mobile 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:

Melissa Sanchez

\_\_\_\_\_  
Name of Person

Beep Beep Mobile LLC

\_\_\_\_\_  
Firm/Company

9165 Lee Vista Blvd Apt 104

\_\_\_\_\_  
Address

Orlando, FL 32829

\_\_\_\_\_  
City/State and Zip Code

info@beepbeepmobile.com

\_\_\_\_\_  
E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Sanchez

407

6490329

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**

2024.11.13 PM 12:20

Beep Beep Mobile LLC

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

The Articles of Organization for this Limited Liability Company were filed on July 28, 2023 and assigned Florida document number L23000357349.

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:

9165 Lee Vista Blvd Apt 104

**(Principal office address MUST BE A STREET ADDRESS)**

Orlando, FL 32829

Enter new mailing address, if applicable:

9165 Lee Vista Blvd Apt 104

**(Mailing address MAY BE A POST OFFICE BOX)**

Orlando, FL 32829

**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:

Melissa Sanchez

New Registered Office Address:

9165 Lee Vista Blvd Apt 104

Enter Florida street address

Orlando

City

Florida

32829

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**



