

L23000402769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

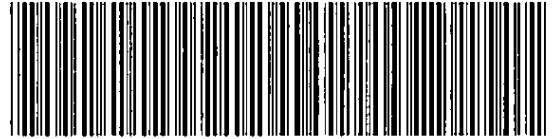
(Business Entity Name)

(Document Number)

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23 OCT 23 PM 1:37
10/20/23 1:37 PM
10/20/23 1:37 PM

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Safe Journey Solutions 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:

Fani LaForest
Name of Person

Safe Journey Solutions LLC
Firm/Company

8500 Sherman Circle North #1502
Address

Miramar, FL, 33025
City/State and Zip Code

FaniLaForest.PW@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fani LaForest at (954) 6667-5500
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**

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

23 OCT 20 PM 1:38

The Articles of Organization for this Limited Liability Company were filed on 08/28/2023 and assigned Florida document number L23000402769

This amendment is submitted to amend the following:

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

Safe Journey Mobility Solutions 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)

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:

495 NW 71st #512

Enter Florida street address

Miami

City

Florida 33150

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>
COO	Edwards, Lloyd D, Jr.	945 NW 179 st	☐ Add
		Miami FL 33169	☒ Remove
			☐ Change
CEO	LaForest, Fani	945 NW 179 st	☐ Add
		Miami FL 33169	☐ Remove
			☒ Change
CEO	LaForest, Fani	495 NW 71 st #512	☒ Add
		Miami FL 33150	☐ Remove
			☐ Change
COO	LaForest, Fani	495 NW 71 st #512	☒ Add
		Miami FL 33150	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

[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.

Dated 11 / 11 / 2018,

Signature of a member or authorized representative of a member

Fant La Forest

Typed or printed name of signee

Filing Fee: \$25.00