## MIH O O O O O O INZO

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4 States APR 22 2014

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: ACE OCT Name of Foreign	MACYCLE LCC. Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
Robert LET VALSITE  Name of Person	
ACE OCEAN LECYCLE DE Firm/Company	. <u></u>
70. 30x 44 Address	
Fort Landerdole Florida - City/State and Zip Code	33302
E-mail address: (to be used for future annual re	eport notification)
For further information concerning this matter, p	lease call:
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:  \$\simeg\$ \$30 \text{ Filing Fee & Certificate of Status}	□ \$55 Filing Fee & □ \$60 Filing Fee, Certified Copy □ Certificate of Status & Certified Copy
CR2E055 (12/13)	Columba Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State:ACE_OCENS_RECYCLE
2. Jurisdiction of its organization: Weynda
3. Date authorized to do business in Florida: 20/4 FEBIUARY 17
SECTION II (4-7 complete only the applicable changes)
4. New name of the limited liability company:
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")
5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: Lynthia MARGY 15 NO LONGER SPENTING MANAGER.  There, 15 ONLY ONE OPERATING MANAGEN JOHNER - ROBERT LEE DARBYTT.
7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.
Signature of the authorized representative
Typed or printed name of signee

Filing Fee: \$25.00