POTOCOO 26371

(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of S	Status
Special Instructions to Filing Officer:	

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JALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BOCA RATON T.	AXL INC						
DOCUMENT NUM	P07000026372							
The enclosed Article	s of Amendment and fee are su	bmitted for filing.						
Please return all corr	espondence concerning this ma	tter to the following:						
	AUGUSTE SAINTVIL							
	Name of Contact Person							
	BOCA RATON TAXL INC							
		Firm! Company						
	2106 N DEXIE HWY							
		Address						
	HOLLYWOOD, FL 33020							
		City/ State and Zip Cod	e					
	AIRPORTAXI@BELLSOU	THNET						
	E-mail address: (to be us	sed for future annual report	notification)					
For further informati	on concerning this matter, plea-	se call:						
AUGUSTE SAINTY	ZII.	786	351-4597					
Name	of Contact Person	Area Code & Daytime Telephone Number						
Enclosed is a check (or the following amount made	payable to the Florida Dep	artment of State:					
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
An Dir P.C	niling Address mendment Section rision of Corporations D. Box 6327 llahassee, F1, 32314	Ameno Divisio The C 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, F1, 32303					



October 5, 2020

PAULETTE SAINTVIL 2106 N. DIXIE HWY HOLLYWOOD, FL 33020

SUBJECT: BOCA RATON TAXI, INC

Ref. Number: P07000026372

We have received your document for BOCA RATON TAXI, INC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The form you submitted is for a Limited Liability Company, but your entity is a Profit Corporation. Please complete and return the enclosed blank form(s).

There is a balance due of \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 720A00019307

Irene Albritton Regulatory Specialist II

www.sunbiz.org



Rosibrut FLORIDA DEPARTMENT OF STATE **Division of Corporations**

August 9, 2020

PAULETTE SAINTVIL 2106 N. DIXIE HWY HOLLYWOOD, FL 33020

SUBJECT: BOCA RATON TAXI, INC.

Ref. Number: P07000026372

We have received your document for BOCA RATON TAXI, INC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

There is a balance due of \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 420A00014970

Irene Albritton Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

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(Name	of Corporation as currentl	y filed with the Florida Dept. of State)	
P07000026372			
	(Document Number o	f Corporation (if known)	_
Oursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the fo	lowing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
· · · · · · · · · · · · · · · · · · ·			The new
	Corp." "Inc." or "Co". :	company," or "incorporated" or the abbr 4-professional corporation name must o	
3. Enter new principal office address.	if applicable:		23
Principal office address <u>MUST BE A S</u>			ć-
			• -
			
. Enter new mailing address, if appl	icable:		
(Mailing address MAY BE A POST			
			 ن
			
D. If amending the registered agent ar new registered agent and/or the new Name of New Registered Agent			
	2106 N DIXIE HWY		
	(Florida str	cet address)	
New Registered Office Address:	HOLLYWOOD	, Florida ^{3,3}	020
		(City)	(Zip Code)
Sew Registered Agent's Signature, if e	kanging Registered Agend		
hereby accept the appointment as regist	terou agent. Tam jamayiri	with and accept the obligations of the posi-	Ron.
	i Signature of Now &	edispered Agent, if changing	_ 10/13/20
Theck if applicable	, (
■ The amendment(s) is/are being filed p	ursuant to s. 607.0120 (11)	(e), F.S.	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	<u>e Jones</u>	
_X Add	<u>SV</u> <u>Sally</u>	<u> Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	PRES	AUGUSTE SAINTVII.	2106 N DIXIE HWY
X Add			HOLLYWOOD, FL 33020
Remove			
2) Change	RE AGT	HANTIN TRANSPORTATION	11900 BISCAYNE BOULEVARD
Add			MIAMI FL 33181
X Remove 3.1 Change	TRUST.	HANTIN TRANSPORTATION	11900 BISCAYNE BOULEVARD MIAMILEL 33181
Add			
X Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amonding an adding addis:	anal Autiala, astes	changets) harm		
. If amending or adding additional sheets, if nec	onai Articies, enter (essarvi (Be specil	ic)		
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<u> </u>				
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 If an amendment provides for provisions for implementing 	r an exchange, recla	ssification, or cance	ellation of issued sha	res.
(if not applicable, indicate	e N/A)	tor commune in the	amendment tesen.	
	_	<u> </u>	.	
				_
				

•	JUNE 14, 2020 1	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed		
	FNE 14, 2020	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this dat Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholder actic	on and shareholder
The amendment(s) was/were : by the shareholders was/were	idopted by the shareholders. The number of votes east for the amendment(s sufficient for approval.	8)
	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by	0	
	tvoting group)	
	director, desident or other officer if directors or officers have not been sted, by an incorporator of it in the hands of a receiver, trustee, or other court	10/13/2020
	inted fiduciary by that fiduciary)	L
	AUGUSTE SAINTVII.	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	