

Florida Department of State  
 Division of Corporations  
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L1800017337

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DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS

2021 JAN 15 AM 9:31

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
 UNITED STATES TRANSPORT, LLC**

Certificate of Status	0
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Page Count	04
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JAN 19 2021

M. SOLOMON

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UNITED STATES TRANSPORT, 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 07/23/2018 and assigned Florida document number L19000177337

This amendment is submitted to amend the following:

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

UNITED STATES TRANSPORT TOWING & RECOVERY, 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:

6258 TAYLOR RD

(Principal office address MUST BE A STREET ADDRESS)

NAPLES, FL 34109

Enter new mailing address, if applicable:

6258 TAYLOR RD

(Mailing address MAY BE A POST OFFICE BOX)

NAPLES, FL 34109

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:

CHANGE OF ADDRESS

New Registered Office Address:

6258 TAYLOR RD

Enter Florida street address

NAPLES

City

Florida

34109

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

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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>
AMBR	CHANGE OF ADDRESS	6288 TAYLOR RD	<input type="checkbox"/> Add
		NAPLES, FL 34109	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	CHANGE OF ADDRESS	6288 TAYLOR RD	<input type="checkbox"/> Add
		NAPLES, FL 34109	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

STATE OF FLORIDA  
DEPARTMENT OF STATE  
ASST. SECRETARY

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)
If an effective date is filed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. Pursuant to 805.0207 (3)(b):
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 JAN 11 2021

Signature of a member or authorized representative of a member

JOSE C. CASTRE
Type or print name of member