118000177883





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AUG 0 6 2018 S. YOUNG RUMBER STORM

COVER LETTER

| TO: Registration Se Division of Cor | ection porations | | | | |
|--|---|---|---|------------------|--|
| Rapone's T | - | | | | |
| 3006HX, C. | Name of Lim | ited Liability Company | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | | |
| Please return all correspo | ondence concerning this matter | to the following: | | | |
| | Timothy Rapone | | | | |
| | | Name of Person | | | |
| | Rapone's Towing | | | | |
| | | Firm/Company | | | |
| | 2275 Danforth road | | | | |
| | ··· | Address | | | |
| | Spring Hill, FL 34608 | | | | |
| | | City/State and Zip Code | | 7. 00 Pr. 00 | |
| | timrapone@outlook.com | · · · · · · · · · · · · · · · · · · · | , | <u>;</u> ':- | |
| For further information of | en-mail address: (| to be used for future annual report notificall: | ention) | JUL 30 MIASSE | |
| Timothy Rapone | | 352 6061565 | | | |
| Name o | of Person | Area Code Daytime | Telephone Number | FILORDA | |
| Enclosed is a check for t | he following amount: | | | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Certificate of Certified Co (additional con | of Status & opy | |
| | | | | | |

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Tim's Auto & Diesef | | |
|--|--|---------------------------|
| (Name of the Limited L.) (A F | iability Company as it now appears on our records.) lorida Limited Liability Company) | <u> </u> |
| The Articles of Organization for this Limited Liabil Florida document numberL18000177883 | lity Company were filed on 07/24/2018 | and assigned |
| This amendment is submitted to amend the following | ıñ: | |
| A. If amending name, enter the new name of the | e 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 | 2: | 5 C @ |
| (Principal office address MUST BE A STREET A | DDRESS) | <u> </u> |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) | <u></u> | SEEFFLORINA |
| B. If amending the registered agent and/or registered agent and/or the new registered office | | nter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| - | Floric | la |
| | Sary . | raje saras |

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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> | Address | Type of Action | | | |
|--------------|-------------------|-----------------------|--|--|--|--|
| AMBR | Timothy Rapone | 2275 Danforth road | Ű Add | | | |
| | | Spring Hill, FL 34608 | □ Remove | | | |
| | | | ■ Change | | | |
| AMBR | Glorimarie Rapone | 2275 Danforth Road | | | | |
| | | Spring Hill, FL 34608 | □ Kemove | | | |
| | | | ■ Change | | | |
| | | | | | | |
| | | | □ Remove | | | |
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| ective date, if other than the reffective date is listed, the date mu- ter. If the date inserted in this blandout's offective date on the D | ock does not meet tl | he applicable stati | filing or more that atory filling requ | (option 90 days after nirements, this | (nal) filing.) Pursuant to date will not be l | 505.02 isted |
| record specifies a delayed the 90th day after the rec | | but not an efi | fective time, | at 12:01 a | .m. on the ea | rlier |
| ed July 27th | 20 | 18 | | | I AL | 18 |
| | <u> </u> | | | | A P | <u></u> |
| , | N C Z | or or authorized con | resontative of a c | - cember | <u> </u> | JL 30 |
| | organisate or a meaning | a or authorized tep | resemante DI & H | RETURNET | řř. | |
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Filing Fee: \$25.00