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C. LEWIS OC1 3 0 5008 **EXAMINER**

COVER LETTER (48)

TO: Registration So Division of Con			
SUBJECT: William	s Products, LLC (Name of Lim	ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Dwayne Williams		
		(Name of Person)	
	Williams Products, LLC	•	
		(Firm/Company)	
r	8879 SW 49 Steet		
		(Address)	•
	Cooper City, FL 33328	(City/State and Zip Code)	
•		(City/State and Zip Code)	
For further information o	concerning this matter, please c	all:	in the control of the property of the control of the second of the control of the
Dwayne Williams		at (954) 415-8294	
(Name	of Person)	(Area Code & Daytime T	elephone Number).
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Enclosed is a check for t	he following amount:		الله المورد الله الله الله الله الله الله الله الل
☑ \$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)
MAII	ING ADDRESS:	STREET/COURIER	: ADDRESS:

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2000 OCT 29 AM 10: 55

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Williams Products, 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 w Florida document number <u>L06000025624</u>	ere filed on 3/20/2006	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ty company here:		
Williams Express Towing, LLC			
The new name must be distinguishable and end with the words "Limited "L.L.C."	Liability Company," the designation "LLC	" or the abbreviation	
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 registered agent and/or the new registered office address here:	e address on our records, enter the	name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
	, Florida		
	(City)	(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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = N	nager Nanaging Member		·
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
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			Add Remove
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D. If amen	ding any other information, enter cha	nge(s) here: (Attach additional sheets, if necessor	ary.)
	per 21	8	ZDBD OCT 29 AM II SECRETARY OF TALLAHASSEE, FI
Dated Octob	Signature of a memi	ber or authorized representative of a member	AMIO: 56
•	Dwayne Williams, Mai	naging Member led or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00