## 10800079126

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

D. BRUCE
OCT 0 3 2008
EXAMINER



## **COVER LETTER**

TO:	Registration Se Division of Cor	ction porations	•	,		
SUBJ	ECT: AAA To	wing & Transport, L	LC			<b>•</b>
		(Name of Lim	ited Liability Company)			
The e	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	e return all correspo	ndence concerning this matter	to the following:			
						•
		Danny C. Brown, Jr.	(Name of Person)			
			(Mane of Felson)			
		AAA Towing & Transport				
			(Firm/Company)			
		72 E. Detroit Blvd	· ·		SEC ALL	
			(Address)		野田	71
		Pensacola, FL 32534			ARY ASSE	[
			(City/State and Zip Code)		OF S	1 1
					STA Float	
For fi	arther information c	oncerning this matter, please c	all:			•
Danr	ny C. Brown, Jr.	·	at (_850_)		•	
	(Name	of Person)	(Area Code & Daytime T	'elephone Number)	)	
Enclo	osed is a check for the	ne following amount:				
<b>☑</b> \$2	25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	of Status &	ed)
MAILING ADDRESS: Registration Section			STREET/COURIER Registration Section Division of Corporation			
P.O. Box 6327 Tallahassee, FL 32314			Clifton Building 2661 Executive Cente Tallahassee, FL 3230	r Circle		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)					
9	ssigned				
Florida document number <u>L0800007</u> <b>\$</b> 126					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liability company here:					
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the "L.L.C."					
Enter new principal offices address, if applicable:	3 1				
(Principal office address MUST BE A STREET ADDRESS)					
mo mo	្រា				
	≅ ∪ •>				
Entou now mailing address if authorities	<u>v</u>				
(Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered office address on our records, enter the name registered agent and/or the new registered office address here:	of the new				
The second secon					
Name of New Registered Agent: James W. King, Jr.					
New Registered Office Address: 945 W. Michigan Ave 5-B					
(Enter Florida street address)					
Pensacola , Florida 32505					
(City) (Zip Co	ode)				

## 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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM_	Paul H. Morgan	72 E. Detroit Blvd Pensacola, FL 32534	Add 7 Remove
·	<del></del> .		<b>=</b> ,
·	<del></del>		Remove
			= n
			<b>—</b> —
D. If amend	ling any other information,	enter change(s) here: (Attach additional sheets	s, if necessary.)
			FILED  OCT -2 PN 2  RETARY OF STANASSEE, FLO
Dated Septe	mber 29		2: 29
	Signatur	re of a member or authorized representative of a mem	iber /
	Danny C. B		•
	Dainty C. E	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00