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E RESCUE, LLC				
Name of Lim	ited Liability Company			
GERARD P. DUMORAN	GE			
	Name of Person			
ROADSIDE RESCUE, LI	.c			
·	Firm/Company			2004 / D
1031 IVES DAIRY ROAI	Suite# 228		16 A	
	Address		8	会別
Miami, Florida 33179		•		RYO
	City/State and Zip Code		<u> </u>	:
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	305 749-6222			
Person	at ()	e Telephone Number		
e following amount:				
□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified Copy		
	RESCUE, LLC Name of Lim Amendment and fee(s) are substandence concerning this matter GERARD P. DUMORAN ROADSIDE RESCUE, LI 1031 IVES DAIRY ROAD Miami, Florida 33179 ROADSIDERESCUE@YA E-mail address: (concerning this matter, please concerning this matter, please concerning this matter) Person	Amendment and fee(s) are submitted for filing. Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: GERARD P. DUMORANGE Name of Person ROADSIDE RESCUE, LLC Firm/Company 1031 IVES DAIRY ROAD Suite# 228 Address Miami, Florida 33179 City/State and Zip Code ROADSIDERESCUE@YAHOO.COM E-mail address: (to be used for future annual report notion concerning this matter, please call: NGE Person at (305 749-6222 at (Area Code Daytim)) The Code Daytim e following amount: \$\textsquare{1}\$\$ \$30.00 Filing Fee & Certificate of Status Certificate Copy	Person RESCUE, LLC Name of Limited Liability Company Amendment and fee(s) are submitted for filling. Amendment and fee(s) are submitted for filling. GERARD P. DUMORANGE Name of Person ROADSIDE RESCUE, LLC Firm/Company 1031 IVES DAIRY ROAD Suite# 228 Address Miami, Florida 33179 City/State and Zip Code ROADSIDERESCUE@YAHOO.COM E-mail address: (to be used for future annual report notification) Incerning this matter, please call: NGE Person at (305 749-6222 749	Amendment and fee(s) are submitted for filing. Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: GERARD P. DUMORANGE Name of Person ROADSIDE RESCUE, LLC Firm/Company 1031 IVES DAIRY ROAD Suite# 228 Address Miami, Florida 33179 City/State and Zip Code ROADSIDERESCUE@YAHOO.COM E-mail address: (to be used for future annual report notification) INCEPTION 100 Area Code Person 100 Person 100 Daytime Telephone Number Telephone Number Telephone Number Telephone Status Certified Copy Certificate of Status & Certified Copy Certificate of Status &

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 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

(Name of the Limit	ed Liability Compo	any as it now appears on our records.)	
(Marie of the Similar	(A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Li	ability Company	were filed on <u>08/26/2008</u>	and assigned
Florida document number L08000081377	· · · · · · · · · · · · · · · · · · ·		-
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
ROADSIDE RESCUE, LLC			7 PS
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "LLC" or the abbr	
Enter new principal offices address, if application	able:	1031 IVES DAIRY ROAD Suite# 228	G SS
(Principal office address MUST BE A STREE		Miami, Florida 33179	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
			aH II: 42
			CRIDA
Enter new mailing address, if applicable:		P.O. Box 381715	* OF
(Mailing address MAY BE A POST OFFICE I	<i>BOX</i>)	Miami, Florida 33238	
B. If amending the registered agent and/or the new registered off			e name of the new
		<u>-</u> -	
Name of New Registered Agent:	GERARD P. D	UMORANGE	
New Registered Office Address:	1031 IVES DA	IRY ROAD Suite# 228	
		Enter Florida street address	
	Miami	, Florida ³³¹⁷	9
		City	Zip Code
New Registered Agent's Signature, if changing R	egistered Agent:		

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.

Manging Registered Agent Signature of New Registered Agent

Page 1 of 3

<u> Title</u>	Name	Address	Type of Action
			□ ∧dd
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 			Add
			□ Remove
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: If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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Typed or printed name of signee

Filing Fee: \$25.00