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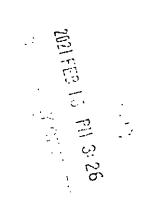
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COVER LETTER

Registration Section Division of Corporations

TO:

	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing		
	ndence concerning this matter	<u>-</u>		
	Pero E. Quintero			
		Name of Person		
		Fum/Company		
	1737 Santa Anna Dr.			
		Address		
	Dunrdin/Florida 34698			
	sgtpedro1961@yahoo.com	City/State and Zip Code		
		to be used for future annual report not	ification)	
For further information e	oncerning this matter, please co	all:		
Pedro E. Quintero		727 748-9317		
Name of Person		at () Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
₹\$25.00 Filing Fee	S30.00 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 conv is enclosed	
Mailing Address Registration S		<u>Street Address:</u> Registration Se	ection	
Division of Corporations		Division of Con	rporations	
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A Above All Last Minute Limo, 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 January 22, 2010 and assigned Florida document number L0000007950 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 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: New Registered Office Address: Enter Florida street address

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.

City

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>	Type of Action
Mgr	Hector Orlando Quintero	172 Talley Dr.	
		Palm Harbor, Fl 31684	
			□Change
Mgr	Wendye Montgomery	1734 Santa Anna Dr.	
		Palm Harbor, Fl 34698	□Remove
			☐ Change
			□Remove
			□Change
			□Add
			□Remove
			Change
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			□Remove
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an effi <u>ote:</u>	ve date, if other than the date of filing:
recore Lis fil	I 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 ed.
estad	2-10-21
ateu ,	
inea .	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00