Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	Doing so will g	generate and	other cover sl	heet.		
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	Division of Corp	orations				im g
	Fax Number	(850)617	7-6383			<u> </u>
						(a)
From:						
	Account Name :	LAZARUS	CORPORATE	FILING	SERVICE.	TINC
	Account Number :				•	
	Phone :	(305)552	2-5973			
	Fax Number :	(305)220	)-1440			

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HEAVY EQUIPMENT WASH LLC

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February 25, 2014

## FLORIDA DEPARTMENT OF STATE Division of Corporations

LAZARUS

SUBJECT: HEAVY EQUIPMENT WASH LLC

REF: L11000078935

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II FAX Aud. #: H14000045323 Letter Number: 414A00004106

## ATTICLES OF AMENDMENT

TO SARTICLES OF ORGANIZATION 1/2

SECRETARY OF LIATE TALLAHASSEE, FLORIDA

, <i>f</i>						
HEAVY Equipment WASH 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 07-07-11 and assigned Florida document number 11000078935						
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 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:						
Trabel in Thomas						
Name of New Registered Agent: LSABEL C. Lbanez						
New Registered Office Address: 5161 N.W. 79 TH AVE # 10  Enter Florida street address						
n / 721//						
<u>IV ιαπι</u> , Florida <u>9516</u> φ						
Now 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, Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent Signature of New Registered Agent

Page 1 of 2

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 = Man MGRM = Ma	ager anaging Member		
<u>Title</u>	Name	Address	Type of Action
MURM	Francisco Navar	<u>~</u>	Add Attemove
			Add Remove 
<u> </u>			Add Remove
	,		Add Remove
			Add Rcmove
			Add Remove
D. If amend	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	2014 FEB 25 Share i and I ALLABASSE
	,	•	AM 9: 01
Dated_	ebruary 24tm, 2	014	
	Signature of a merabor JCAB (A) Typed	or printed name of signee	

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