

L12000034155

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H13000233595 3)))



H130002335953ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : LAW OFFICES OF STEINBERG & ASSOCIATES P.A.
Account Number : I19980000080
Phone : (305)538-2344
Fax Number : (305)538-0419

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

Email Address: mark@alhadeflaw.com

FILED
OCT 21 PM 1:29

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TREMONT TOWING INVESTMENT, LLC

Table with 2 columns: Item, Amount. Rows: Certificate of Status (0), Certified Copy (0), Page Count (01), Estimated Charge (\$25.00)

OCT 22 2013
A. LUNT

RECEIVED
13 OCT 21 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMISSION VERIFICATION REPORT

TIME : 10/21/2013 15:22
NAME : SENATOR LAW CENTER
FAX : 3055380419
TEL : 3055382344
SER.# : M9N639766

Table with 2 columns: Metadata (DATE, TIME, FAX NO., DURATION, PAGE(S), RESULT, MODE) and Values (10/21 15:14, 18506175383, 00:08:41, 00, NG, STANDARD, ECM)

NG: POOR LINE CONDITION / OUT OF MEMORY

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H13000233595 3)))



H130002335953ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : LAW OFFICES OF STEINBERG & ASSOCIATES, P.A.
Account Number : X19980000080
Phone : (305) 538-2344
Fax Number : (305) 538-0419

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

Email Address: mark@alhadeflaw.com

H1 3000233595 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tremont Towing Investment, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:

Mark Alhadeff
Name of Person
The Alhadeff Law Group, P.L.
Firm/Company
767 Arthur Godfrey Road
Address
Miami Beach, FL 33140
City/State and Zip Code
mark@alhadefflaw.com
E-mail address: (to be used for future annual report notification)

FILED
2013 OCT 21 PM 1: 28

For further information concerning this matter, please call:

Mark Alhadeff at (305) 538-2344
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$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)

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

H1 3000233595 3

H13000233595 3

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Tremont Towing Investment, 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 09/09/2012 and assigned Florida document number L12000034155.

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)

1747 Bay Road
Miami Beach, FL 33139

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1747 Bay Road
Miami Beach, FL 33139

FILED
2013 OCT 21 PM 1:23
CLERK OF CIRCUIT COURT
MIAMI BEACH, FLORIDA

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

_____, 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

H13000233595 3

H13000233595 3

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

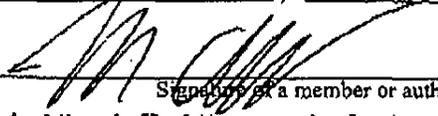
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Diaz, Manny, Jr.	1861 Bay Road	<input type="checkbox"/> Add
		Miami Beach, FL 33139	<input checked="" type="checkbox"/> Remove
MGRM	Diaz, Manuel E.	1747 Bay Road	<input checked="" type="checkbox"/> Add
		Miami Beach, FL 33139	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED
 2013 OCT 21 PM 1:28
 SENATOR LAW CENTER
 MIAMI BEACH, FL 33139

H13000233595 3

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated October 12, 2013



Signature of a member or authorized representative of a member

Mark Alhadeff, Attorney-in-fact

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

2013 OCT 21 PM 1:28
 FILED
 SENATOR LAW CENTER