

LA 000123418

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 06 2015

S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Towmaxx 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:

Dwayne Willians

Name of Person

Firm/Company

1536 NE 31 Street

Address

Ft Lauderdale, FL 33064

City/State and Zip Code

towmaxxtowing@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dwayne Williams

954

415-8294

Name of Person

at (_____) _____
Area Code

Daytime Telephone Number

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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

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

TOWMAXX 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 09/27/2012 and assigned
Florida document number L12000123418.

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:

Dwayne Williams

New Registered Office Address:

1536 NE 31 Street

Enter Florida street address

Ft Lauderdale

, Florida

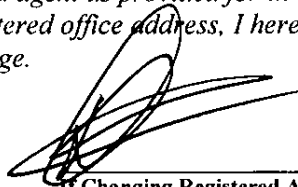
33064

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 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.



If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Type of Action</u>
MGRM	Mark Vespia		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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

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TALLAHASSEE FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

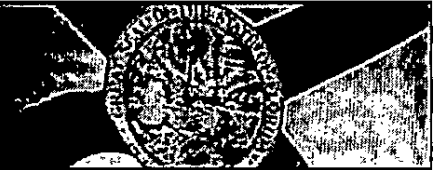
(b) The 90th day after the record is filed.

Dated November 2 2015

Signature of a member or authorized representative of a member

Dwayne Williams

Typed or printed name of signee

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Limited Liability Company

TOWMAXX, LLC

Filing Information

Document Number L12000123418

FEI/EIN Number ~~N/A~~

Date Filed 09/27/2012

Effective Date 09/26/2012

State FL

Status ACTIVE

46-1072367
please update
EIN

Principal Address1536 NE 31 STREET
FT. LAUDERDALE, FL 33064Mailing Address1536 NE 31 STREET
FT. LAUDERDALE, FL 33064Registered Agent Name & Address~~VESPIA, MARK~~
1536 NE 31 STREET
FT. LAUDERDALE, FL 33064

Dwayne Williams

Authorized Person(s) DetailName & Address

Title MGRM

~~VESPIA, MARK~~
1536 NE 31 STREET
FT. LAUDERDALE, FL 33064

Title MGRM

WILLIAMS, DWAYNE
1536 NE 31 STREET
FT. LAUDERDALE, FL 33064Annual Reports

Report Year Filed Date

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TALLAHASSEE, FLORIDA

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11/2/2015

Detail by Entity Name

2013	01/16/2013
2014	02/26/2014
2015	04/27/2015

Document Images

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