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To:

Division of Corporations

Fax Number

: (850)617-6383

Account Name

: JORGE M CASTILLO CPA

Account Number : I20140000067

: (305)275-0208

Fax Number

: (305)275-0210

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TAMIAMI TOWING SERVICE LLC

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COVER LETTER

	ision of Cor					
SUBJECT:	TAMIAM	I TOWING SERVIĆE LI	LC	,	,	
V-100.2-41,		Name of Limit	ted Liability Company			
		Amendment and fee(s) are subm ndence concerning this matter t				
	,	Jorge M Castillo CPA	4			
			Name of Person		•	
			Firm/Company			
		9190 Sunset Dr				
		Address				
		Miami, FL 33173				
		jorge@castillo-cpa.co	City/State and Zip Code			
		E-mail address: (to	be used for future annual	report notification)		
For further in	nformation co	aceming this matter, please ca	ш:			<u>ज</u>
Jorge M		· .	305 2°	75-0208	1.13 1.23 1.23	AR -
	Name of	Person	Area Code	Daytime Telepho	one Number	一2 至
Enclosed is a	check for the	e following amount:				
□ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee Certified Copy (additional copy is en		\$60.00 Filing Fee, Certificate of State Certified Copy (additional copy is enc	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallabassee, 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

TAMIAMI TOWING SERV			
(Name of the Lim	ted Liability Company as it now (A Florida Limited Liability Com	appears on our records.)	
The Articles of Organization for this Limited L. Florida document number L12000133032	iability Company were filed	on 10/17/2012	and assigned
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability comp	anv here:	
The new name must be distinguishable and end with the	words "Limited Liability Compar	y," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applied	eable:		· 5
(Principal office address MUST BE A STRE)	T ADDRESS)		n 13 22 - 1
		<u></u>	4 2 4
		\mathcal{H}	A Po in
Enter new mailing address, if applicable:			Y E U
Mailing address MAY BE A POST OFFICE	<u>BOX</u>)		=======================================
			过高 元
B. If amending the registered agent and registered agent and/or the new registered o		ess on our records, enter the	name of the nev
Name of New Registered Agent:	Name of New Registered Agent: Jorge M Castillo CPA		
New Registered Office Address:	9190 Sunset Dr		
the same of the sa	En	ter Florida street address	
	Miami	Florida 3317	3
	City		ip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi- being filed to merely reflect a change in the	er and complete performat istered agent as provided fo	nce of my duties, and I am fami or in Chapter 605, F.S. Or, if th	liar with and is document is

if Changing Registered Agent, Signi

Page 1 of 3

company has been notified in writing of this change.

Apr. 2. 2015 2:32PM Connolly Wasserstrom Castillo PAP 1500 000.3343, 4P. 4/52 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

■ Add
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r. 2. 2015 2:321	M Connolly Wasserstrom	Castillo PA	4/ JNO. 3343
If amending any other	r information, enter change(s) he	re: (Attach additional s	heets, if necessary.)
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(The effective date must be	r than the date of filing: pecific, cannot be prior to date of receipt or led by the Florida Department of State)	filed date and cannot be mor	(optional) e than 90 days after
Dated March 31	, 2015	· · ·	
	grot_		
Yamell R	Signature of a member or aut odriguez Gonzalez	noused tebiesedmanve of a n	nember
	There	ted some africans	

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