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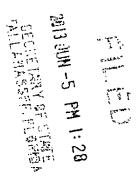
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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JUN - 6 2013

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: AAA Auto Transport Solutions, 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:
Lelissa Dalacios Name of Person
MP Accounting Services Inc.
5274 Golden Gate Parkway
Daples FL 3411 Ce
MOACCOUNTING HOW (a) Yahoo, Com.
For further information concerning this matter, please call:
For further information concerning this matter, please call: Melissa Palacios at 339331-8718 Name of Person Area Code & Daytime Telephone Number 539 54
Enclosed is Teheck for the following amount:
\$25.00 Filing Fee Sound Filing Fee & Sound Filing Fee & Sound Filing Fee & Sound Filing Fee & Certificate of Status & Certificate of Status & Sound Filing Fee & Certificate of Status & Sound Filing Fee & Certificate of Status & Sound Fee & Sound Fee & Status & Sound Fee & Sound Fee & Status & Sound Fee & Sound Fee & Sound Fee & Sound Fee & Status & Sound Fee &

MAILING ADDRESS:

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AAA Auto To (Name of the Limited Lia	an Soor + S	olutions, UC
(A Flo	rida Limited Liability Company)	
The Articles of Organization for this Limited Liabi	lity Company were filed on	1/4/3 and assigned
Florida document number <u>1130000</u>	20/2	1 1
Tronda document named 250000	80/0-	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
,		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	·	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO.	X)	35 J
	<u></u>	
B. If amending the registered agent and/or	registered office address on ou	r 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:		
now registered office reducing.	Enter	· Florida street address
		, Fiorida
-	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 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 Title Type of Action **Name Address** VP Shamere McCloud 105 Saddlebrook Dr Add Covington, GA 30016 X Remove VP Charles McCloud 1124 Willcrest Walk NWX Add Conyers, GA 30012 Remove

.; If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	5/17 2017
ited	Signature of a member or authorized representative of a member
	Typed or printed name of signee Page 3 of 3

rage 5 01 5

Filing Fee: \$25.00

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and service of the se