

L/3000/03/62

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

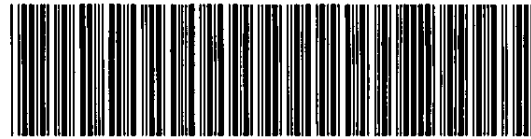
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

NOV - 4 2013

A. LUNT

Office Use Only



100252911951

10/31/13--01016--008 **25.00

RECEIVED
FALLMANSSECT (LARGO)

2013 OCT 31 PM 6:55

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hason Towing & Recovery 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:

Jason Sapp
Name of Person

Hason Towing & Recovery LLC
Firm/Company

6829 E Hwy 388
Address

Youngstown FL 32466
City/State and Zip Code

hasontowingandrecovery@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Sapp at (850) 814-3617
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
2013 OCT 31 PM 5:55
TALLAHASSEE, FL 32301

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

Hason Towing & Recovery 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 7/22/2013 and assigned
Florida document number L13000103162

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NA

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)

NA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NA

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:

NA

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

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>
MGR	Jason D. Sapp	6829 E Hwy 388	<input type="checkbox"/> Add
		Youngstown FL 32466	<input checked="" type="checkbox"/> Remove
MGRM	Jason D. Sapp	6829 E Hwy 388	<input checked="" type="checkbox"/> Add
		Youngstown FL 32466	<input type="checkbox"/> Remove
MGR	Kimberly A Gandy	6829 E Hwy 388	<input type="checkbox"/> Add
		Youngstown FL 32466	<input checked="" type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED
DATE 08-31-2012 BY 60322 UCBAW/STP

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

NA

Dated October 28, 2013.

Jason D. Sapp

Signature of a member or authorized representative of a member

Jason D. Sapp

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 OCT 31 PM 5:55
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED