(1/6/2016 rida Department of State

> Division of Corporations Electronic Filing Cover Sheet

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(((H160000025573)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: PROMINENT SERVICES INC

Account Number : 120150000063

Phone

: (305)889-2880

Fax Number

; (305)889-2881

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

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Corporate Filing Menu

Help.

ARTICLES OF AMENDMENT () TO ARTICLES OF ORGANIZATION OF

2016 JAN -7 PM 4: 25

21005/007

SECRETARY GLUBIATES FALLATIASSEE, FLORIDA

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(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 01/05/2015 and assigned Florida document number L14000102610 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: HADI EL HALABI Name of New Registered Agent: 6332 NW 72 AVENUE New Registered Office Address: Enter Florida street address Florida 33166 MIAMI

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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(HI/OCCOCODITH)	~~ \ ~~

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	HADI EL HALABI	6332 NW 72 AVENUE	Add
		MIAMI, FL 33166	□ Remove
			_ ☐ Change
MGR	JENIREE CAROLINA	6332 NW 72 AVENUE	Add
		MIAMI, FL 33166	■ Remove
			☐ Change
MGR	MARIA L CONSTANTINO	6332 NW 72 AVENUE	Add
		MIAMI, FL 33166	■ Remove
			☐ Change
			□ Add
			□ Remove
	•		☐ Change
			□ Add
			Remove
	•		☐ Change
<u>.</u>		****	□ Add
	•		□ Remove
			☐ Change

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20
2016 JAN

Page 3 of 3

Filing Fee: \$25.00