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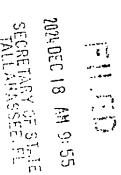
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COVER LETTER

TO:

Registration Section

Division of Corp	oorations		g*	
	INT HEAVY EQUIPMENT I	LLC	•	
SUBJECT:	Name of Lim	nited Liability Company		
	Amendment and fee(s) are sub	-		
rease return an evirespon	idence concerning this matter	to the following.		
	HECTOR CHAVEZ			
		Name of Person		
	AT DISCOUNT HEAVY	EQUIPMENT LLC		
		Firm/Company		
	12591 SW 134ct Unit # 10	95		
		Address		- •
	MIAMI, FL 33186			SEC Drivi
		City/State and Zip Code		PE I
	hector@abecontractorsservi E-mail address: (to be used for future annual report notif	lication)	五句 00
For further information co	ncerning this matter, please c			SECRETARY SESTE
HECTOR CHAVEZ		305 321 8941		कर्ति ही
Name of	Person	at () Area Code Daytime	e Telephone Number	
Enclosed is a check for the	e 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 Filin Certificate (Certified Certi	of Status &
Mailing Address Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro	porations)

Tallahassee, FL 32303

COVER LETTER

	ion Section of Corporations		
	ISCOUNT HEAVY EQUIPMENT	LLC	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Artic	les of Amendment and feets) are sul	bmitted for tiling.	
	rrespondence concerning this matter	-	
	HECTOR CHAVEZ		
		Name of Person	
	AT DISCOUNT HEAVY	EQUIPMENT LLC	
		Firm/Company	
	12591 SW 134ct Unit # 19	05	
		Address	
	MIAMI, FL 33186		
	hector@abecontractorsserv	City/State and Zip Code	
		(to be used for future annual report notif	ication)
For further informa	ation concerning this matter, please of	call:	
HECTOR CHAVE	ZZ	305 321 8941	
	lame of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check	, for the following amount:		
■ \$25.00 Filing I	© \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate on That is cadditional copy is milosed
Division P.O. Bo	tion Section of Corporations	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	porations miles of allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AT DISCOUNT HEAVY EQUIPMENT LLC

(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	i <u>v as it now appears on our records.</u>) ability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on 08/06/2014	and assigned
Florida document number L14000122952		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liability and Contain the words "Linited Liability and Contain the Words" and Contain the words "Linited Liability and Contain the Words" and Contain the Words and Contain th	ty Company," the designation "ELC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		SE PE
		SC D T
Enter new mailing address, if applicable:		F 5
(Mailing address MAY BE A POST OFFICE BOX)		公宝 至
	-	mo e
		(T. U)
B. If amending the registered agent and/or registered office adaptated and/or the new registered office address here:	ddress on our records, <u>enter th</u>	e name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da
	City	da
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr	performance of my duties, and	Lam familiar with and

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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Fitle</u>	<u>Name</u>	Address	Type of Action
Title MG	Benavidez, Kristy Lorraine , MGR	12591 SW 134ct Unit # 105	□ Add
		MIAMI, FL 33186	■Remove
			Change
			□Remove
			□Change
			SECRETALLA A LA
		**************************************	n ☐ Cin
			Change
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ective date, if other than the date	of filing:	(optio	onal)
ective date, if other than the date i effective date is listed, the date must be sp te: If the date inserted in this block d cument's effective date on the Departi	oes not meet the applicable statut	ling or more than 90 days after ory filing requirements, this	filing.) Pursuant to 605,026 date will not be listed a
ecord specifies a delayed effective date s filed.	e, but not an effective time, at 12:0)1 a.m. on the earlier of: (b)	The 90th day after the
ed December 10, 2024	Miami		
	nure of a hember of authorized repre	\sim / \sim	,

Typed or printed name of signee