## 1150000 42813

(Req	uestor's Name)	<u> </u>
(Add	ress)	
(Add	ress)	
(City,	/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL.
(Bus	iness Entity Na	me)
(Doc	ument Number	)
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



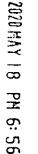
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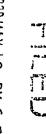
05/19/20--01005--013 RECEIVED MAY 1 8 2020

<del>\*:55.00</del> ZS. ⇔

JUN 0 8 2020

S. YOUNG





## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
CUBICT.	Ty's Towing	g & Recovery, LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
		James Davis	
		Name of Person	
		Firm/Company	
		6035 11th St Ct E	
		Address	
		Bradenton, FL 34203	<u></u>
		City/State and Zip Code	
		ystowing 1016@gmail.com to be used for future annual report n	estification)
For further information c	oncerning this matter, please c		(Marie Lawrence)
Jame	s Davis	941 753-1	
Name o	f Person	at () Area Code Day(	time Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address: Registration 9	
Registration S  Division of C		Division of C	
P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Ty's Towing o	& Recovery, LLC		The state of the s
(Name of the Limi	ted Liability Compa (A Florida Limited)	any as it now appears of Liability Company)	on our records.)	The second
The Articles of Organization for this Limited L Florida document numberL15000042813	iability Company	were filed on	03/09/2015	and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name of	of the limited liab	oility company here	<u>:</u> :	
The new name must be distinguishable and contain the v	words "Limited Liabi	lity Company," the desi	gnation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applie				
(Principal office address MUST BE A STREI	<u>ET ADDRESS)</u>	-		
		6035 11th St Ct E		
Enter new mailing address, if applicable:		Bradenton, FL 342		
(Mailing address MAY BE A POST OFFICE	BOX)			
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our rec	ords, <u>enter the</u>	name of the new registere
Name of New Registered Agent:	James Davis			
New Registered Office Address:	6035 11th St C	T E		
		Enter Florido	a street address	
	Bradenton		, Florid:	a 34203
		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 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.

Changing Registered Agent, Signature of New Registered Agent

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>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Add
			□Remove
			□Change
			□Add
		<del></del>	□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
		□Remove	
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			□Add
		□Remove	
			□Change
		□Add	
			Remove
			□Change

	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe Note:   I	te date, if other than the date of filing:
he record ord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	May 12 2020.  Signapore of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	UAMES DAUS Typed or printed name of signee

Filing Fee: \$25.00