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SECRETARY OF STATE

COVER LETTER

TO:			· .	
SUBJE	Alpha Equip	oment Services, LLC	:	
		Name of Lim	ited Liability Company	·
The enc	losed Articles of .	Amendment and fee(s) are sub-	mitted for filing)	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Richard Webb		•
			Name of Person	
		Alpha Equipment Services.	LLC	·
		-	Firm Company	-
		3406 East Hwy 92		
			Address	
		Plant City, FL 33566		
			City/State and Zip Code	
		E-mail address: ()	to be used for future annual repo	t notification)
For furt	her information co	oncerning this matter, please ca	all:	
Richard	l Webb		813 455-73	04
	Name of	Person	Area Code D	aytime Telephone Number
Enclose	d is a check for th	Name of Limited Liabilay Compared Articles of Amendment and fee(s) are submitted for filing. In all correspondence concerning this matter to the following: Richard Webb Name of Person		
■ \$25	5.00 Filing Fee		L1 \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed)
	Mailing Address	<u>s:</u>	Street Addre	<u>ss:</u>

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

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Alpha Equipment Services, LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records, liability Company)		
he Articles of Organization for this Limited Liability Company	were filed on 09/14/2015	and assigned	
lorida document number 1.15000156001			
his amendment is submitted to amend the following:			
a. If amending name, enter the new name of the limited liab	ility company here:		
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC"	or the abbreviation "L.L.C."	
inter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)		2024 250 250	
		RRET.	
		名語 へ	
inter new mailing address, if applicable:		2 C	
Mailing address MAY BE A POST OFFICE BOX)			
		<u> </u>	
I. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new registo	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	Emer r tortaa street aaat ess		
	Flor	rida Zip Code	
	City	zīp coae	

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.

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jim Mosley Jr	4629 Mount View Drive	□Add
		Lakeland, FL 33813	≡ Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			⊡Add
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Filing Fee: \$25.00