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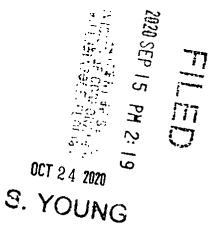
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COVER LETTER

Э:

Name			ited Liability Company	
he encl	osed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
lease re	turn all corresp	ondence concerning this matter	to the following:	
	Division of Corporations MGR TOWING LLC Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. see return all correspondence concerning this matter to the following: YASMANY PUERTO ROCHE Name of Person PRESIDENT / MGR TOWING LLC Firmt/Company 12120 SW 191 TERRACE Address MIAMI, FL 33177 City/State and Zip Code MGRTOWINGLLC@GMAIL.COM E-mail address: (to be used for future annual report notification) further information concerning this matter, please call:			
			Name of Person	
		PRESIDENT / MGR TOW	ING LLC	
			Firm/Company	
		12120 SW 191 TERRACE		
		•	Address	- -
Address MIAMI, FL 33177 City/State and Zip Code MGRTOWINGLLC@GMAIL.COM E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call:				
		MGRTOWINGEL <i>C@</i> GM/	Name of Limited Liability Company sent and fee(s) are submitted for filing. oncerning this matter to the following: SMANY PUERTO ROCHE Name of Person SIDENT / MGR TOWING LLC Firm/Company O SW 191 TERRACE Address MI, FL 33177 City/State and Zip Code FOWINGLE@GMAIL.COM E-mail address: (to be used for future annual report notification) g this matter, please call: 1786 Area Code 241-838 Daytime Telephone Number ing amount: 1.00 Filing Fee & S55.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed) Street Address: Registration Section Division of Corporations The Centre of Tallahassee 4 2415 N. Monroe Street, Suite 810	
		Name of Limited Liability Company icles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following: YASMANY PUERTO ROCHE Name of Person PRESIDENT / MGR TOWING LLC Firm/Company 12120 SW 191 TERRACE Address MIAMI, FL 33177 City/State and Zip Code MGRTOWINGLLC@GMAIL COM R-mail address: (to be used for future annual report notification) nation concerning this matter, please call: ERTO ROCHE PRESIDENT / MGR TOWINGLLC@GMAIL COM R-mail address: (to be used for future annual report notification) nation concerning this matter, please call: ERTO ROCHE 241-838 Area Code Daytime Telephone Number ck for the following amount: g Fee S 300.00 Filing Fee & Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) Address: Registration Section Division of Corporations on of Corporations On Of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
or furth	er information	concerning this matter, please ca	ali:	
'ASMA	NY PUERTO	ROCHE		
	Name	of Person		ne Telephone Number
nclosed	is a check for	the following amount:		
□ \$ 25./	00 Filing Fee	-	Certified Copy	Certificate of Status & Certified Copy
	Registration Division of 0 P.O. Box 63	Section Corporations 27	Registration Se Division of Co The Centre of 2415 N. Monro	orporations Tallahassee oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MGR TOWING LLC

(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appe: i Limited Liability Company)	ars on our records.	
ne Articles of Organization for this Limited Liability C	Company were filed on	09/23/2015	25 SE TO SE AND ASSIGNED
	company were med on _		5
orida document numberL15000162109	<u> </u>		38年刊 (1767)
nis amendment is submitted to amend the following:			P 2
. If amending name, enter the new name of the limi	ited liability company h	<u>iere</u> :	19
ie new name must be distinguishable and contain the words "Lim	ited Liability Company," the	designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDR	RESS)		
nter new mailing address, if applicable:			
Aailing address MAY BE A POST OFFICE BOX)			
			<u></u>
. If amending the registered agent and/or registered gent and/or the new registered office address here:	d office address on our	records, <u>enter t</u>	he name of the new registere
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Strice Address.	Enter Fle	orida street address	
		, Flor	rida
	City		Zip Code
ew Registered Agent's Signature, if changing Registered	d Agent:		
hereby accept the appointment as registered agent ovisions of all statutes relative to the proper and concept the obligations of my position as registered againg filed to merely reflect a change in the registere ompany has been notified in writing of this change.	omplete performance o gent as provided for in	f my duties, and Chapter 605, F	II am familiar with and "S. Or, if this document is
	If Changing Registered A	gent, Signature of	New Registered Agent

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

GR = Manager

1BR = Authorized Member

<u>e</u>	<u>Name</u>	Address	Type of Action
R	DANIELA DOMINGUEZ LEIVA	6191 W FLAGLER ST APT 5 MIAMI FL 33144	= Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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	01/01/2020	
ective date, if other than the dat in effective date is listed, the date must be since: If the date inserted in this block is cument's effective date on the Depart	specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 does not meet the applicable statutory filing requirements, this date will not be list	5.0207 () ted as th
coord specifies a delayed effective dat is filed.	ate, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
ed SEPTEMBER 11th	2020	
	your.	
Sign	nature of a member or authorized representative of a member	
YASMANY PUERTO RO		
-	Typed or printed name of signee	