

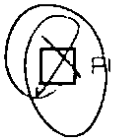
45000195743

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP

WAIT

MAIL

(Business Entity Name)

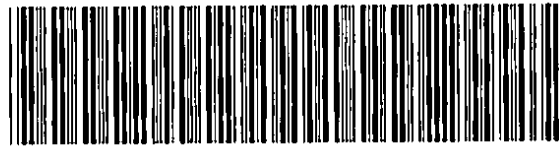
(Document Number)

Certified Copies _____ Certificates of Status _____

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10/23/20--01001--026 **25.00

RECEIVED
2020 OCT 22 PM 3:47
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
FILED
2020 OCT 29 AM 10:43

OCT 2020



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 OCT 29 AM 9:19

October 23, 2020

NATHAN BYRON
3457 EXMOUTH LANE
TALLAHASSEE, FL 32317

SUBJECT: EVERY SECOND COUNTS AUTO TRANSPORTER LLC
Ref. Number: L15000195743

We have received your document for EVERY SECOND COUNTS AUTO TRANSPORTER LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 520A00021060

COVER LETTER

Registration Section
Division of Corporations

SUBJECT: Every Second Counts Auto Transporter
Name of Limited Liability Company

enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nathan Biron
Name of Person

Every Second Counts
Firm/Company

3457 Exmouth Ln Tallahassee FL 32317
Address

Tallahassee FL 32317
City/State and Zip Code

escautotransport@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nathan Biron at (423) 596-6999
Name of Person Area Code Daytime Telephone Number

enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

ready Paid
rong Signature

Mailing Address:

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

Street Address:

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**

Every Second Counts Auto Transporter
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 11-24-2015 and assigned
Florida document number L15000195743.

This amendment is submitted to amend the following:

If amending name, enter the new name of the limited liability company here:

Every Second Counts LLC

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

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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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.

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Effective date, if other than the date of filing: Oct 29, 2020 (optional)

If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If record 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 document is filed.

Dated Oct 29, 2020.



Signature of a member or authorized representative of a member

Nathan Byron

Typed or printed name of signee