1600026043

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: Mailed in Amendment Do Not File !! Was mailed in on 3/9/23 |

Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: TAST Towing and Relavery LC Name of Limited Liability Company |
| |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Tashera Mr. 1605 |
| Name of Person |
| FITTH Orlando LLC |
| CONT. CO. I. CO. |
| 1311 Stanley Stacet |
| Address |
| Jurguar Pl 32750 |
| City/State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| \wedge |
| Melveg Willis 2, 305, 394 4705 |
| Name of Person Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| □ \$25.00 Filing Fee Certificate of Status □ \$30.00 Filing Fee Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) |

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

| | 2023 MAR 29 AM II: 23 |
|---|---|
| | ery LLC |
| | 2/8/2016 |
| This amendment is submitted to amend the following: | cles of Organization for this Limited Liability Company were filed on |
| FTRoriando LLC | |
| The new name must be distinguishable and contain the words "Limited Liabil | |
| Enter new principal offices address, if applicable: | 1311 Stanley Street |
| (Principal office address MUST BE A STREET ADDRESS) | longward PU 32750 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 1311 Starly Street longulous PL 32750 |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: | eddress on our records, enter the name of the new registered |
| Name of New Registered Agent: | |
| New Registered Office Address: | Enter Florida street address |
| | |
| | , Florida |

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 |
|--------------|-------------|-------------|----------------|
| | | | □Add |
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| | |
| Note: | tive date, if other than the date of filing: 3 6 2 3 (optional) |
| ne reco ord is f | rd 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 iled. |
| Dated | Morch 19 2023 |
| Duice | |