

LIL 0000 9F129

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

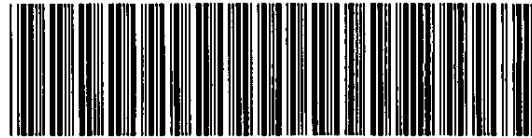
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/16/16--01029--002 **25.00

SEP 16 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 19 2016
J. HARRIS

TO WHOM IT MAY CONCERN;

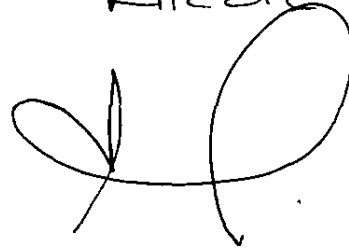
PLEASE FIND ENCLOSED MY COVER LETTER
WITH APPROPRIATE FEE FOR CHANGE OF
ADDRESS FOR MY LLC.

YOU MAY REACH ME AT ⁷⁵⁴~~954~~-902-0126

IF YOU HAVE ANY CONCERNS AND OR
SEND LETTER OF ACKNOWLEDGEMENT TO

NICOLE FRANK
1530 SW. 45 AVE
PEMBROKE PINES, FL 33025

NICOLE FRANK.

A stylized handwritten signature consisting of a large loop and a vertical stroke.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Professional Towing & Asset Recovery

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:

Nicole Frank

Name of Person

Professional Towing & Asset Recovery

Firm/Company

2451 SW 59th ave

Address

West Park/ Florida 33023

City/State and Zip Code

Protowingandassetrecovery@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicole Frank

754

8020126

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 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:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Professional Towing & Asset Recovery, LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/19/2016 and assigned
Florida document number L16000098129.

This amendment is submitted to amend the following:

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

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)

2451 sw 59th ave

West Park Fl 33023

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2451 sw 59th ave

West Park Fl 33023

B. 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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

☐ Change
☐ Add
☐ Remove
☐ Change

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

E. Effective date, if other than the date of filing: 09/13/16 (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 the 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 record is filed.

Dated September 13, 2016

Signature of a member or authorized representative of a member

Nicole Frank

Typed or printed name of signee

16 SEP 16 PM 2:07
SEATTLE, W STATE
TALLAHASSEE, FL 19900