16000125297

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	05/26/20010290
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(Document Number)	; <u>.</u> ;
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July 1 or 2020

I ALBRITTON

COVER LETTER

TO:	Registration Se Division of Cor			
SUBJI	ECT:			
			ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	indence concerning this matter	to the following:	
		Jose Rafael Sarduy Castro		
			Name of Person	
		A&Y Auto Transport Serv	ice LLC	
			Firm/Company	
		2905 41s ST W		
			Address	
		Bradenton, FL 34205		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notific	ation)
For fur	ther information c	oncerning this matter, please ca	all:	
Jose R	afael Sarduy Castr	ro	941 357-3122 at ()	
	Name o	f Person	Area Code Daytime 1	Celephone Number
Enclos	ed is a check for th	ne following amount:		
□ \$2	5.00 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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A&Y AUTO TRANSPORT SERVICE LLC

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our re Liability Company)	cords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L16000125297</u> .	were filed on June 28.2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Andy Car Mover Experts LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity 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:		To the name of the new region
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>er</u>	nter the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ac	ddress
	City	, FloridaZp Code
New Registered Agent's Signature, if changing Registered Agent:	•	Dip Court
hereby accept the appointment as registered agent and agr		I further garage to assembly with

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	Juan Carlos Espinosa Acosta	2905 41st ST W, Bradenton, FL 34209	■Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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an ef lote:	tive date, if other than the date of filing:
recor	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.
الحجورة	··
aica	/
ated	Signature of a member or authorized representative of a member