# 117000077972

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	⇒ #)
	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

SUBJECT:	AUTO HAULING USA LLC				
		Name of Lim	ited Liability Company		
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Nick Wilmot			
			Name of Person		
		Debbies Accounting Servi	ice, Inc		
		<del> </del>	Firm/Company		
		3575 Southside Blvd			
			Address		
		Jacksonville, Fl. 32216			
			City/State and Zip Code		
		nick@debbiesaccountingse		<del></del>	
or further in	iformation co	n-mail address: ( oncerning this matter, please ea	to be used for future annual report notifi all:	cation)	
lick Wilmo	t		904 733-4547		
	Name of	f Person	Area Code Daytime	Telephone Number	
closed is a	check for th	e following amount:			
\$25.00 F	iling 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

TO:

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

AUTO HAULING USA LLC	
(Name of the Limited Liability Company as it now appears or (A Florida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{04/06}{1}$ Florida document number $\frac{117000077972}{1}$ .	/2017 and assigned
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 desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
•	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on ou	ir records, enter the name of the ne
registered agent and/or the new registered office address here:	
	<u> </u>
Name of New Registered Agent:	Ćô
Navy Davietanal Office A Alamou	63
New Registered Office Address:  Finter 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.

City

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	DELGADO, ANTHONY	10275 OLD ST AUGUSTINE RD	
		АРТ 206	■ Remove
		JACKSONVILLE, FL 32257	□ Change
MGRM	RODRIGUEZ, JOANA	10275 OLD ST AUGUSTINE RD	
		APT 206	B Remove
		JACKSONVILLE, FL 32257	Change
			D Add
			□ Remove
			☐ Change
			↔ ERemove
			Change
	<del></del>		
		□ Remove	
			Change
		<del></del>	Add
			□ Remove

Please List EIN as Current: 82-1	093271		
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Removing Anthony Delgado and	Joana Rodridguez		
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		64	
	specific and cannot be prior to date of does not meet the applicable statu	(optional) filing or more than 90 days after filing.) Pursuant atory filing requirements, this date will not b	
cord specifies a delayed ef : 90th day after the record		fective time, at 12:01 a.m. on the e	arlic
20th day after the record	is the a.		
November 6th	2017		
Tula.	1.1		
	nature of a member or authorized repr	recontains of a marcher	_

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Filing Fee: \$25.00