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(Requestor's Name)	
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(Address)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Degument Number)	
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COVER LETTER

Division of Cor			
SUBJECT: 5 PC	S_TOWING.	SERVICES	
		ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspondence	ondence concerning this matter t	to the following:	
	VALENT	IN J TERMI	LIENUR
	-	Firm/Company	
	4240 NW	1244 STREGT Address	
	LAUDERHIL	L FL 33313	
	termilien	City/State and Zip Code (a) 9/42/1/. Columbia obe used for future annual report notification.	
For forther information of			ication)
LIM.	concerning this matter, please ca	at (<u>754</u>) 6W 9	466
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he 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 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

SPS TOWING S	ERVICES LLC
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it ποw appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 17 0000 97223</u>	were filed on $05/02/2017$ 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:
The new name must be distinguishable and contain the words "Limited Liabi	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)	4260 NN 38 TERES Laude-dale Laher \$33349
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4260 NW 38 TERE :
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
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 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>	Name	Address	Type of Action
MGR	PROSPEERS	4260 NW 38+L TER Lauderlakes FL 33309	□Add
<u>MGR</u>	WOODJERRY PROSPERE	4260 NW 38th TER Laudelakes Fl 33309	□Change XAdd □Remove
			☐ Change ☐ Add ☐ 200 ☐ Remove
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an effective date is li ote: If the date in	other than the date isted, the date must be sp serted in this block do be date on the Departs	pecific and cannot be oes not meet the a	pplicable statutory	or more than 90 days of	tional) ter filing.) Pur his date will	suant to 605.020 not be listed a
record specifies a is filed.	delayed effective date	, but not an effect	ive time, at 12:01 a	.m. on the earlier of:	(b) The 90t	h day after the
nted	-03-		020			
	Signa	ture of a member or	authorized represent	ntive of a member		_
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