## L17000103255

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Amend Manuchs

FEB 1 9 2020 I ALBRITTON

## **COVER LETTER**

Registration Section Division of Corporations

O:

By Owner I UBJECT:	Rescue EEC		<del></del>
	Name of Lim	ited Liability Company	
he enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
lease return all correspo	indence concerning this matter	to the following:	
	Julio C Trejo		
		Name of Person	***
	By Owner Rescue		
		Firm/Company	
	5903 Tulip Flower Dr		
		Address	<u></u>
	Riverview Florida 33578		
		City/State and Zip Code	
	juliotrejo l l@hotmail.com		<u></u>
	E-mail address: (	to be used for future annual report no	tification)
or further information e	oncerning this matter, please c	all:	
ulio Trejo		956 244-1554 at ()	
Name o	f Person	Area Code Daytii	ne Telephone Number
inclosed 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 3 Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration S Division of Co The Centre of 2415 N. Monra Tallahassee, F	orporations Tallahassee oe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## BY OWNER RESCUE LIMITED LIABILITY COMPANY (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) he Articles of Organization for this Limited Liability Company were filed on $\frac{01/17/2020}{}$ and assigned lorida document number 1.17000103255 his amendment is submitted to amend the following: . If amending name, enter the new name of the limited liability company here: aferisa LLC to new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." nter new principal offices address, if applicable: <u> Principal office address MUST BE A STREET ADDRESS)</u> nter new mailing address, if applicable: Mailing <u>address MAY BE A PO</u>ST OFFIC<u>E</u> BOX) . If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

ew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ecept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is eing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany 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>	<u>Address</u>	Type of Action
			□Add
			🗆 Remove
			□Change
			□Add
			□Remove
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			□Change
			□Add
			Remove
			☐ Change
			\_Add
			□Remove
			Change

Da	ferisa LLC
wi	Il change from automobile sales and service to purchase and sales of good and services.
.—	<del></del>
_	
tier	e date, if other than the date of filing:
ume	nt's effective date on the Department of State's records.
file	
ed _	Friday January 17. 2020.
	Millows.
	Signature of accember of authorized representative of a member