## L17000112483

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## **COVER LETTER**

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CHB IDZ	HIGHWAY	Y TOWING SERVICES & INVESTMENTS LLC	
SUBJEC	I;	Name of Limited Liability Company	
The enclo	osed Articles of a	Amendment and fee(s) are submitted for filing.	
Please ret	urn all correspo	ondence concerning this matter to the following:	
		LINDA INNOCENT	
		Name of Person	
		HIGHWAY TOWING SERVICES & INVESMENTS LLC	
		Firm/Company	
		3300 NW 101ST STREET	
		Address	
		MIAMI, FL 33147	
		City/State and Zip Code	<del></del>
		RICOLADE2424@YAHOO.COM	<del> </del>
		E-mail address: (to be used for future annual report noti	lication)
For furthe	r information co	concerning this matter, please call:	
LINDA I	NNOCENT	786 9085555	
	Name of	at ()  of Person Area Code Daytim	e Telephone Number
Enclosed	is a check for th	he following amount:	
\$25.0	0 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

HIGHWAY TOWING SERVICES & INVESTMENTS 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  $\underline{\phantom{0}^{05/22/2017}}$ and assigned Florida document number L17000112483 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 "ELC"? Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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

## 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, 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>	<u>Address</u>	Type of Action
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		MIAMI, FL 33137	Remove
			□ Change
AMBR	RICO INNOCENT	30 NE 43RD STREET	Add
		MIAMI, FL 33137	Remove
			Change
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JULY 24TH		2017	<u></u> •			
	at					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00