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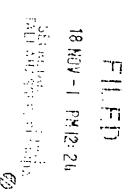
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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

CHD IECT.		360 AUTO TRANSPORT L	.C	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed Article	es of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all cor	respon	dence concerning this matter	to the following:	
		Al	.ENA KWIATKOWSKI	
			Name of Limited Liability Company  d feets) are submitted for filing.  sting this matter to the following:  ALENA KWIATKOWSKI  Name of Person  360 AUTO TRANSPORT LLC  Firm/Company  601 ROSERY RD NE #1852  Address  LARGO, FL 33770  City/State and Zip Code  ato360Transport@gmail.com  E-mail address: (to be used for future annual report notification)  matter, please call:  127  Area Code  10366 - 9661  Daytime Telephone Number  nount:  thing Fee & S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)  S:  STREET/COURIER ADDRESS: Registration Section	
		360	AUTO TRANSPORT LLC	
			Firm/Company	
		60	LROSERY RD NE #1852	
		-	Address	
			LARGO, FL 33770	
			City/State and Zip Code	
		•	<del>-</del> -	ATAT AND
For further informat	ion co	ncerning this matter, please ca		ancanony
Alena Kwiatkowsk			727 366 - 9661	
N:	ame of	Person	Area Code Daytii	me Telephone Number
Enclosed is a check	for the	following amount:		
■ \$25.00 Filing Fe	ee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Re	egistra	NG ADDRESS: tion Section of Corporations	Registration Sect	ion

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Co	RANSPORT LLC ompany as it now appears on our recor iited Liability Company)	<u>(ds.</u> )
The Articles of Organization for this Limited Liability Complete Horida document number $\frac{L18000002925}{L18000002925}$ .	pany were filed on 01/03/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
360 Customz LLC		
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6624 126th Ave N	
Principal office address MUST BE A STREET ADDRES.	Unit 6	## <b>2 m</b>
	Largo, FL 33773	2
Enter new mailing address, if applicable:	6624 126th Ave N	PH 7
Mailing address MAY BE A POST OFFICE BOX)	Unit 6	<u> </u>
	Largo, FL 33773	3
3. If amending the registered agent and/or registere egistered agent and/or the new registered office address	ed office address on our record	ds, enter the name of the
Name of New Registered Agent:		
New Registered Office Address: 6624 126ti	h Ave N Unit 6	
	Enter Florida street addre	exs
Largo	F	lorida <u>33773</u>
	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 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 Type of Action <u>Title</u> Name 1 **Address** ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Remove... □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove

\_□ Change

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Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or more Note: If the date inserted in this block does not meet the applicable statutory filing or document's effective date on the Department of State's records.	(optional) ethan 90 days after filing.) Pursuant to equirements, this date will not be l	605,0201 listed as
ne record specifies a delayed effective date, but not an effective tim The 90th day after the record is filed.		rlier of
Dated October 16 2018  Alma Kantkonisca  Signature of a member or authorized representative of		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00