118000023193

(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Dx	ocument Number)	
Certified Copies	Certificates	of Status
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: H Hernandez Towing LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Heriberto Hernandez
H Hernandez Towing LLC
115 W 5th St. Address
Chuluota, FL 32766 City/State and Zip Code
h. hernandez towing @ qmail-com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JHGJHGJKHGKKK Heriberto Hernander 407, 883-5509
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status 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

H Hernandez To	wing LLC
(<u>Name of the Limited Liability Company a</u> (A Florida Limited Liabi	is it now appears on our records.)
The Articles of Organization for this Limited Liability Company we Florida document number <u>L 1800023193</u> .	re filed on $1-25-18$ 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 C	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)	18 V S
_	OR ORE
	1
Enter new mailing address, if applicable:	P
(Mailing address MAY BE A POST OFFICE BOX)	12:
	3 5
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	e address on our records, enter the name of the
Name of New Registered Agent:	
New Registered Office Address:	
·	Enter Florida street address
	, Florida
-	City Zip Code

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR.	Roberto Hernandez	18541 Madison ave. Orla	indo, FL 32820 ■ Add
			☐ Remove
			Change
MGR	Yomalys Figueroa	115 W 5th St. Chulud	21 32 06 a □ Add
			■ Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			Change
			□ Remove
			Change
			Add
			Remove
			□ Change

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Effective date, if other than f an effective date is listed, the date Note: If the date inserted in the document's effective date on the	us block doe	es not me	et the appl	icable statu	filing or mor itory filing	e than 90 da requiremen	(optional) ys after filing its, this date	.) Pursuant to will not be	605,0207 listed as
e record specifies a dela The 90th day after the			te, but r	not an eff	ective tir	ne, at 12	:01 a.m.	on the ea	arlier of
Dated August	14.	·	201	<u>8</u> .					
1" 171 1 1									
	Signatu	re of a mo	ember or au	thorized repr	resentative o	f a member			_

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Filing Fee: \$25.00