# L1800028516

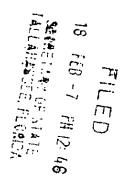
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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## **COVER LETTER**

Div	ision of Corp	orations		
SURIFCT:	Colon's Tow			
30131.01.				
The enclosed	Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		Wesley Colon		
			Name of Person	
Firm/Company				<del></del>
		13225 Casper Lane		
			Address	
		Clermont, FL 34711		
		Colonstowing@gmail.com	City/State and Zip Code	
			to be used for future annual report notifi	cation)
For further in	nformation co	ncerning this matter, please ca	all:	
Wesley Cold	on		201 951-6955	
	Name of	Person	at ()	Telephone Number
Enclosed is a	check for the	: following amount:		
■ \$25.00 F	iling 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:

TO: Registration Section

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

Colon's Towing and Transport, LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on our record Limited Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liability Co. Florida document numberL18000028516	ompany were filed on 01/31/2018	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LL)	C" or the abbreviation "L.IC."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	ESS)	· — — —
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		ds, enter the name of the no $\mathbb{R}^{1}$ is $\mathbb{R}^{2}$
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	(S) 49 1 =
	, F	lorida 😅 🚆 🗍
<del></del> -	City	Zh Zh Eode
New Registered Agent's Signature, if changing Registered	d Agent:	Ö

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, <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
AMGR	Wesley Colon	13225 Casper Lane, Clermont, FL 1	Add
			Remove
			Change
			Add
			□ Remove
			☐ Change
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ective date, if other than the	date of filing:		(optional)	. D	0 F 10
effective date is listed, the date must e: If the date inserted in this blo	t be specific and cannot be prock does not meet the ann	nor to date of filing or n dicable statutory filin	ore than 90 days after filing. g requirements, this date	will not be lis	ยร.บ sted
ument's effective date on the Do			<b>5</b> 1		
record specifies a delayed	effective date, but	not an effective t	ime, at 12:01 a.m.	on the earl	lier
he 90th day after the reco					
February 5	2018				
i1//		<del></del>			
///	11-				

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee