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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Dade Wrecker Service 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:	
SANTINO ACOSTA Name of Person	
Dade Wrecker Service LLC Firm/Company	
3582 NW 35 Ave	
Miami, FL 33142 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Santing Acosta at (786) 273-1618 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & \$\Bigcup \\$55.00 Filing Fee & \$\Bigcup \\$55.00 Filing Fee & \$\Bigcup \\$560.00 Filing Fee. \$\Bigcup \\$certificate of Status & \$\Bigcup \\$certified Copy \\ (additional copy is enclosed) \\ (additional copy is enclosed) \\ \Bigcup \\$30.00 Filing Fee. \$\Bigcup \\$55.00 Filing Fee. \$\Bigcup \	

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 Taliahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dade Wiecker	- Service LLC
(Name of the Limited Liabilit (A Florida	ty Company as it now appears on our records.) (Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number <u>L 1800 o 125</u> 986	Tompany were filed on $\frac{5/21/18}{}$ and assigned ${}$.
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ited liability company here:
The new name must be distinguishable and contain the words "Limit	ited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR	RESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SECTION AND 28
B. If amending the registered agent and/or registered agent and/or the new registered office addi	tered office address on our records, enter the frame of the new ress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Kevin Real Bozo	3582 NW 35 Ave	🗹 Add
		Miami, FZ 33142	Remove
			Change
<u>VP</u>	Cenica Romero Bozo	3582 NW 35 Aue	 Add
		Miani, FL 33142	Remove
			☐ Change
<u>AMBR</u>	Felix Almeida	3582 NW 35 Ave	
		Miami, FL 33142	Remove
			Change
			Remove
			Change
		·	
			□ Remove
			Change
			□ Remove
		<u></u>	Change

, 11 MIII	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an el <u>Note:</u>	tive date, if other than the date of filing: 8/20/19 (optional) Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
the re) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	August 20th 2019
	Signature of a member of authorized representative of a member
	Santino Acosta Typed or printed name of signee
	Typed or printed name of signee

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Filing Fee: \$25.00