

L18000162257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

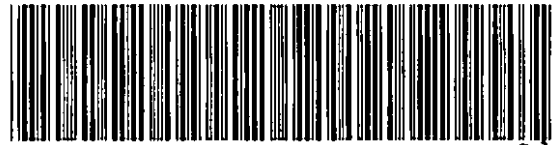
(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 OCT 27 PM 2:13
STATE
FLORIDA

APPROVE
AND
FILE

07/25/22--01035--005 **25.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 19, 2022

HOSSAMELDIN A EL-SANKARY
EL-SANKARY TOWING, LLC
1600 PIRATES COVE
PONCE DE LEON, FL 32455

SUBJECT: EL-SANKARY TOWING, LLC.
Ref. Number: L18000162257

We have received your document for EL-SANKARY TOWING, LLC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6862.

Sean Toner
Director

Letter Number: 022A00023396

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: EL-SANKARY 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:

HOSSAMELDIN A EL-SANKARY

Name of Person

EL-SANKARY TOWING, LLC

Firm/Company

1600 PIRATES COVE

Address

PONCE DE LEON, FL 32455

City/State and Zip Code

HOSSAMELSANKARY@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hossam ElSankary at (850) 419-0208
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

APPROVED:
AND
FILED

2022 OCT 27 PM 2:10

EL-SANKARY TOWING LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

COUNTY OF STATE
HALLABASSO, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on JULY 3, 2018 and assigned
Florida document number L18000162257.

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 "L.L.C."

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:

HOSSAMELDIN M. EL-SAKARY

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Mohamed A El-Sankary	1600 Pirate Cove	<input type="checkbox"/> Add
		Ponce De Leon, Fl 32455	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Hossameldin M. El-Sankary	1600 Pirate Cove	<input checked="" type="checkbox"/> Add
		Ponce De Leon, Fl 32455	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	Hossameldin El-Sankary	1600 Pirate Cove	<input type="checkbox"/> Add
		Ponce De Leon, Fl 32455	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective 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)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.


Signature of a member or authorized representative of a member

Hussameldin Elsantary
Typed or printed name of signee

Filing Fee: \$25.00