

48000187992

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

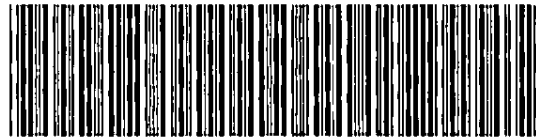
(Business Entity Name)

(Document Number)

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LLC
Almend

SECRETARY OF STATE
TALLAHASSEE, FL

2019 FEB 12 AM 9:55

FILED

FEB 16 2019

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TAMPA BAY QUICK TOW 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:

ALDO DIAZ

Name of Person

TAMPA BAY QUICK TOW LLC

Firm/Company

5830 W 64TH PLACE

Address

Chicago, Illinois 60638

City/State and Zip Code

fish4diaz@yahoo.com

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

For further information concerning this matter, please call:

ALDO DIAZ

813

863-6575

at (_____) _____

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/COURIER ADDRESS:

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

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

TAMPA BAY QUICK TOW LLC

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

FILED
2019 FEB 12 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 08-06-2018 and assigned
Florida document number L180000187992.

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)

5830 W 64TH PLACE

CHICAGO, ILLINOIS 60638

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5830 W 64TH PLACE

CHICAGO, ILLINOIS 60638

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:

AMELIA DIAZ

New Registered Office Address:

1510 EAST PALM AVE # APT A314

Enter Florida street address

TAMPA

City

Florida 33605

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	ALDO DIAZ	5830 W 64TH PLACE CHICAGO, ILLINOIS 60638	<input checked="" type="checkbox"/> Add
		4511 W FERN ST TAMPA, FLORIDA 33614	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

UPDATED MAILING ADDRESS AND UPDATED AGENT NAME AND ADDRESS.

ALSO UPDATED THE MANAGER ADDRESS FROM: 4511 W FERN ST TAMPA , FLORIDA 33614

TO: NEW ADDRESS

TO: 5830 W 64TH PLACE CHICAGO, ILLINOIS 60638

AND ALSO UPDATED PRINCIPAL OFFICE TO : 5830 W 64TH PLACE CHICAGO, ILLINOIS 60638

E. Effective date, if other than the date of filing: 01-24-2019 **(optional)**

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated JANUARY 24TH 2019



Signature of a member or authorized representative of a member

ALDO DIAZ

Typed or printed name of signee