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DIVISION OF CORPORATIONS

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COVER LETTER

TO: Registration Section Division of Corporation			~
SUBJECT: VÛ	Kêros 5 To	Wing LLC ited Liability Company	
The enclosed Articles of Am	endment and fee(s) are sub	mitted for filing.	
Please return all corresponde	nce concerning this matter	to the following:	
	Yadier	Pena Gonzalez	7
	Vaker	o's Towing LLC Firm/Company J LLC	<u>, </u>
		SW 36 Ter	
	Miai	MI FL 33185 City/State and Zip Code ena Q Yahoo - Com to be used for future annual report notifi	>
-	Yadier De Efmail address (1	ena (a) Yahoo - Com to be usurior future annual report notifi	cation)
For further information conc	erning this matter, please ea	il:	
Jadier Pena Name of Pe	(2017 24 EZ	at (<u>786</u>) <u>620 –</u> Area Code Daytime	Telephone Number
Enclosed is a check for the fo	ollowing 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

Vakero's Town	ing LLC
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) Lability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000 [91995</u> .	were filed on 8102018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)	15341 SW 36 Ter Miami, FL 33185 US
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	15341 Sw 36 Ter Miami, FL 33185 US
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, enter the name of the new
Name of New Registered Agent:	SECKE IVISION AUG
New Registered Office Address:	Enter Florida street address 5 22 2
	City Zip Citle A A Soft
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre	e to act in this capacity. I further agree to comply with the

Thereby 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 Type of Action Title Name Address Yadier Pena Gonzalez _d Change □ Add □ Remove _ 🗆 Add ☐ Remove _□ Change

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	Department of State		· · · · · · · · · · · · · · · · · · ·			
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Page 3 of 3

Filing Fee: \$25.00