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THE STATE OF STATE OF STATE

D SCOTT MAY 1 5 2019

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: HEAVY LIFTING Equipment LLC Name of Limited Viability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Darnie of Person
Heavy Lifting Equipment LLC
191025 NW 5th Ct
Miami, FL 33169
E-mail address: (to be used for future annual report/notification)
For further information concerning this matter, please call:
Darnie of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
25.00 Filing Fee Solution Status Solution Stat
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Ciffon Building Tallahassee, FL 32301 CTREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Kimited Liability Com	GEQUIDNO ppiny as it dow appears on of trability Company)	CO.+ LLC		
The Articles of Organization for this Limited Liability Compa Florida document number <u>L190012210810</u> .	ny were filed on5	114/19	and a	ssigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited li	ability company here:			
The new name must be distinguishable and contain the words "Limited Li-	ability Company," the design:	ition "LLC" or the abbi	eviation "!	L.L.C."
Enter new principal offices address, if applicable:				····
(Principal office address MUST BE A STREET ADDRESS)			7.2	
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Enter new mailing address, if applicable:			٦٦	
(Mailing address MAY BE A POST OFFICE BOX)		:.	ン	7
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			: 1	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		records, enter the	he namo	e of the new
Name of New Registered Agent:	4			
New Registered Office Address:				
	Enter Florida st.	reet address		
	City	, Florida	7in Code	
	UIIV		zin Codi	

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 = Au	thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Tective date, if other the neffective date is listed, the date: If the date inserted in current's effective date or	late must be specific and ca this block does not me	annot be prior to di et the applicable	ate of filing or more the statutory filing req	(option an 90 days after fi uirements, this d	ling.) Pursuant to 605.0
record specifies a d The 90th day after th		te, but not ar	n effective time	, at 12:01 a.ı	m. on the earlier
ted 5 14	Signature of a rue	2019.	d representative of a	member	,
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Page 3 of 3

Filing Fee: \$25.00