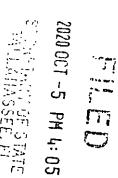
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| PICK-UP WAIT MAIL                       |
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| Special Instructions to Filing Officer: |
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## **COVER LETTER**

| ): Registration S<br>Division of Co |  |   |               |
|-------------------------------------|--|---|---------------|
| Steel Tow                           | n Auto Transport                             | •   |               |
| Ј <b>ВЈЕСТ</b> :                    | Name of Lin                                  | nited Liability Company                                 |               |
|                                     |  |   |               |
| he enclosed Articles of             | Amendment and fee(s) are sul                 | bmitted for filing.                                     |               |
| lease return all corresp            | ondence concerning this matter               | r to the following:                                     |               |
|                                     | Lorraine Cirruto                             |   |               |
|                                     |  | Name of Person  |               |
|                                     | Steel Town Auto Transpo                      | rt  |               |
|                                     |  | Firm/Company  |               |
|                                     | 4 Admirals Walk                              |   |               |
|                                     |  | Address   |               |
|                                     | Stuart, FL. 34996                            |   |               |
|                                     | Steeltownautotransport@g                     | City/State and Zip Code                                 |               |
|                                     |  | (to be used for future annual report notification)      |               |
| For further information of          | concerning this matter, please o             | eall:   |               |
| Lorraine Cirruto                    |  | 954 383-5656  |               |
| Name o                              | of Person                                    | at ()   |               |
| Enclosed is a check for t           | he following amount:                         |   |               |
| ■ \$25.00 Filing Fee                | ☐ \$30.00 Filing Fee & Certificate of Status | (additional copy is enclosed) Certified                 | c of Status & |
| Mailing Address                     |  | Street Address:   |               |
| Registration S<br>Division of C     |  | Registration Section Division of Corporations           |               |
| P.O. Box 632                        | 27   | The Centre of Tallahassee                               | 10            |
| Tallahassee,                        | FL 32314                                     | 2415 N. Monroe Street, Suite 8<br>Tallahassee, FL 32303 | 10            |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited Liability Company as it now ap<br>(A Florida Limited Liability Company)   | pears on our records.)        | ·                                     |
|--|-------------------------------|---------------------------------------|
| he Articles of Organization for this Limited Liability Company were filed on lorida document number 1.19000183426  | 7/16/2019                     | and assigned                          |
| his amendment is submitted to amend the following:   |                               |                                       |
| . If amending name, enter the new name of the limited liability company  | <u>here</u> :                 |                                       |
| ne new name must be distinguishable and contain the words "Limited Liability Company," t   | ne designation "LLC" or th    |                                       |
| nter new principal offices address, if applicable:   |                               | 2020                                  |
| Principal office address MUST BE A STREET ADDRESS)   |                               | <u> </u>                              |
| The spirit of th |                               | · · · · · · · · · · · · · · · · · · · |
|  |                               | MAC P III                             |
|  |                               |                                       |
| nter new mailing address, if applicable:   |                               | 근목 6                                  |
| Mailing address MAY BE A POST OFFICE BOX)  |                               | <u>्रा</u>                            |
|  |                               |                                       |
| If amending the registered agent and/or registered office address on outent and/or the new registered office address here:   | r records, <u>enter the t</u> | name of the new regis                 |
| Name of New Registered Agent:  |                               |                                       |
| New Registered Office Address:   | Florida street address        |                                       |
| 12.00  |                               |                                       |
| Cin  | , Florida                     | Zip Code                              |

## New Registered Agent's Signature, if changing Registered Agent:

STEEL TOWN AUTO TRANSPORT LLC

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

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

GR = Manager

**ИBR** = Authorized Member

| <u>tle</u> | <u>Name</u>     | <u>Address</u>                            | Type of Action  |
|------------|-----------------|---|---|
| MBR        | KERENSA CARPANI | 1913 NW 167 AVE, PEMBROKE PINES, FL 33028 | _ <b>■</b> Add  |
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| Kerensa Carpani Vice President   |  |                  |
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| tive date, if other than the date of filing:   | <b>(optional)</b> re than 90 days after filing.) Pursuant to | 605.020          |
| If the date inserted in this block does not meet the applicable statutory filing rement's effective date on the Department of State's records. | requirements, this date will not be                          | list <b>ed</b> a |
| nent's effective date of the Department of State's records.  |  |                  |
| ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on  | the earlier of: (b) The With day s                           | ifter the        |
| filed.   | . The william of the soulding t                              |                  |
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| 9/2/2000   |  |                  |
| Juan Cento   |  |                  |
| Signature of a member or authorized representative of  | f a member   |                  |