

L19000 280 615

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

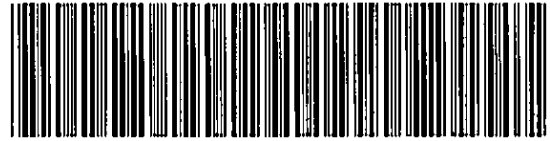
(Business Entity Name)

(Document Number)

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2020 JUN 10 PM 12:28  
CLERK

Amend

JUN 25 2020

ALBRITTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 5 Star Towing & Roadside Service, 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:

Taylor C. Hires  
Name of Person

5 Star Towing & Roadside Service, LLC  
Firm/Company

405 SE 12<sup>th</sup> Street  
Address

Carrabelle Fla. 32322  
City/State and Zip Code

5startowingandroadsideervice@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Taylor C. Hires at ( 850 ) 653-5419  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |                                                        |                                                                        |                                                                                                  |                                                                                                                            |
|--------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

5 Star Towing & Roadside Service, LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/12/2019 and assigned  
Florida document number L19000280615

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)

405 SE 12<sup>th</sup> St.  
Carrabelle, Fla. 32322

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME

**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:

Taylor C. Hires

New Registered Office Address:

405 SE 12<sup>th</sup> St.

Enter Florida street address

Carrabelle, Florida 32322

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.*

Taylor C. Hires

If Changing Registered Agent, Signature of New Registered Agent

If a pending 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          | CiERRA HIRES    | 293 Sago Dr.                | <input type="checkbox"/> Add               |
|              |                 | Eastpoint, Fl. 32328        | <input checked="" type="checkbox"/> Remove |
|              |                 |                             | <input type="checkbox"/> Change            |
| MGR          | Taylor C. HIRES | 405 SE 12 <sup>th</sup> St. | <input checked="" type="checkbox"/> Add    |
|              |                 | Carrabelle, Fl. 32322       | <input type="checkbox"/> Remove            |
|              |                 |                             | <input checked="" type="checkbox"/> Change |
|              |                 |                             | <input type="checkbox"/> Add               |
|              |                 |                             | <input type="checkbox"/> Remove            |
|              |                 |                             | <input type="checkbox"/> Change            |
|              |                 |                             | <input type="checkbox"/> Add               |
|              |                 |                             | <input type="checkbox"/> Remove            |
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|              |                 |                             | <input type="checkbox"/> Remove            |
|              |                 |                             | <input type="checkbox"/> Change            |
|              |                 |                             | <input type="checkbox"/> Add               |
|              |                 |                             | <input type="checkbox"/> Remove            |
|              |                 |                             | <input type="checkbox"/> Change            |

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

Sole ownership of 5Star Touring & Roadside Service LLC was given to Tayler C. Hines in exchange for house and land.

See attached

E. Effective date, if other than the date of filing: 5/29/2020 (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 June 1<sup>st</sup>, 2020

Tayler C. Hines  
Signature of a member or authorized representative of a member

Tayler C. Hines  
Typed or printed name of signee