## L20000125164

(Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phone	#)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nam	e)		
(Document Number)				
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FILED 2020 OCT 19 PM 2: 03

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	<b>.</b>		F 00 0CT
Payless Towing and Transport LLC			
(Name of the Limit	ed Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)	19 P
The Articles of Organization for this Limited Li	ability Company were f	filed on 05/08/2020	and assigned
Florida document number L20000125164			03
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name o	f the limited liability co	ompany here:	
The new name must be distinguishable and contain the w	yords "Limited Liability Con	npany," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applic			
(Principal office address MUST BE A STREE	<u> </u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office addre ss here:	ss on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:	Eloisa Sanchez-Puelle	3	
New Registered Office Address:	5217 E Broadway Av	е	
THE REGISTION OF THE PROPERTY.		Enter Florida street address	
	Tampa	, Florid	da 33619
	C	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.

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>	Address	Type of Action
MGR	Sanchez-Puello, Eloisa	1308 E Sligh Ave	
		TAMPA, FL 33604	Remove
		<u></u>	Change
MGR	Martinez-Sosa, Ronny	1308 E Sligh Ave	Add
		TAMPA, FL 33604	O G ☐Remove
			Change
MGR	Delacruz- Silverio , Irving Gregoric	1308 E Sligh Ave	≅Add
		TAMPA, FL 33604	□Remove
			☐ Change
		<del></del>	□Add
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		05/00/2020						
fective date, if other than the da	ate of filing:	05/08/2020			(option:	al)		
in effective date is listed, the date must be one: If the date inserted in this block	e specific and ca k does not med	annot be prior to et the applicab	date of filing o le statutory fi	r more than 90 ling requiren	days after tili ients, this da	ng.) Pursuant ate will not	to 605.0 be liste	020. d as
cument's effective date on the Department	artment of Sta	te's records.	•					
	lata but not or	ı effective tim	e, at 12:01 a.r	n. on the earl	ier of: (b)	The 90th da	ıy after	the
	iaic, but not at							
is filed. October 16		2020	. /					
is filed. October 16								
is filed.  October 16  Ited		2020						
ated		2020	zed representat	ive of a memb	er			