

LZO 000 218650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 SEP 24 PM 2:56
CLERK OF STATE
TALLAHASSEE, FL

Ja 10/30/20

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Acevedo Towing Services 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:

Jose L Acevedo
Name of Person

Acevedo Towing Services LLC
Firm/Company

Po Box 25003
Address

Tampa FL 33622
City/State and Zip Code

jesus.0375.ay@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jose L Acevedo at (813) 858.2007
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 &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Acevedo Towing Services LLC

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Santiago Brenda L</u>	<u>6720 S Lois ave apt 3102</u>	<input type="checkbox"/> Add
		<u>Tampa FL 33616</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Jose L Acevedo</u>	<u>3424 S Macdill ave apt 32</u>	<input checked="" type="checkbox"/> Add
		<u>Tampa FL 33629</u>	<input type="checkbox"/> Remove
			<input 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"/> Change

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TALLAHASSEE FL

2020 SEP 24 PM 2:55
CLERK OF STATE
TALLAHASSEE, FL

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TALLAHASSEE, FL

(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)

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.

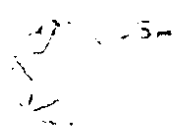
Dated September 22, 2020

Joe L. Atwell
Signature of a member or authorized representative of a member

Jose L Acevedo
Typed or printed name of signee

Florida

CDL



CDL# **A213-432-75-091-0**

CLASS A

ACEVEDO GONZALEZ

JOSE LUIS

43424 S MACDILL AVE APT 32
TAMPA, FL 33629-8838

DOB 03/11/1975 SEX M

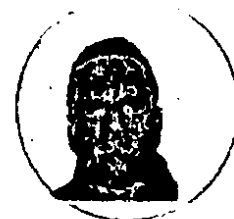
EXP 03/11/2028 HGT 5'-09"

REST NONE END NONE

SAFE DRIVER

ISS 01/17/2020

SEC 8/120011/0263



John Smith

Operation of a motor vehicle constitutes
consent to any sobriety test required by law