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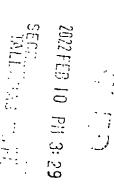
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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration S Division of Co						
ERICK TI	ERICK TRANSPORTATION SERVICES, LLC					
Sobstee 1.	· Name of Limi	ited Liability Company		٠		
The enclosed Articles o	f Amendment and fee(s) are sub-	mitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	ERICK TAMAYO					
		Name of Person		,		
	ERICK TRANSPORTATI	ON SERVICES, LLC				
	.	Firm/Company				
	4415 WALTHAM DR					
		Address		,		
	TAMPA, FL 33624					
		City/State and Zip Code		2077 FEB 511.1111		
	ERICCUBA123@GMAIL.0					
		to be used for future annual report notif	ication)	10 1		
For further information	concerning this matter, please ca	all:				
ERICK TAMAYO		813 562 2416 at ()		<u> </u>		
Name	of Person		e Telephone Number			
Enclosed is a check for	the following amount:					
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifica Certified	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Section Corporations	Street Address: Registration Sec Division of Cor	porations			
P.O. Box 63	.27	The Centre of T	allahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ERICK TRANSPORTATION SERVICES, 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 v	were filed on 08/07/2020	and ass	igned
Florida document number L20000237852			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	lity company here:		
JUNK CARS TAMAYO, LLC			
The new name must be distinguishable and contain the words "Limited Liability	ty 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)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office ac agent and/or the new registered office address here:	ddress on our records, <u>enter the na</u>	me of the nev	v registered
Name of New Registered Agent:		. 5	.,
New Registered Office Address:		: O	
	Enter Florida street address	ည်း မှ	3
	, Florida	· NZip Gode	

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 Sminging 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 semoved from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ERICK TAMAYO	4415 WALTHAM DR, TAMPA. FL 33624	= Add
			□Remove
			□Change
AMBR	ERICK TAMAYO	4415 WALTHAM DR, TAMPA, FL 33624	= Add
			□Remove
			□Change
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(If an effective date is	f other than the da s listed, the date must be inserted in this block	specific and cann	ot be prior to da	te of filing or mo	re than 90 days	optional) after filing.) I	Pursuant to	3; -29
document's effect	tive date on the Depa	rtment of State's	s records.			t this care is	not co	nated to
e record specifies rd is filed.	a delayed effective d	ate, but not an ei	ffective time, a	at 12:01 a.m. o	ı the earlier o	f: (b) The	90th day a	fter the
Dated			·					
	No.							
	No.	mature of a memb	er or authorized	representative of	f a member			