L21000001761

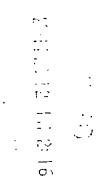
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates of	f Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

Registration Section

TO:

Division of Co	rporations		
	Services LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	amitted for filing	
Please return all correspo	ondence concerning this matter	to the following:	
	Carmen J. Gonzalez		
		Name of Person	
		Firm/Company	
	982 Derbyshire Dr		
		Address	
	Kissimmee / Florida / 347.	58	
		City/State and Zip Code	
	carmenyanette7265@gmail		
		to be used for future annual report no	uncation)
For further information of	oncerning this matter, please c	all:	
Richard Soto		321 525-3175 at ()	
Name o	f Person	Area Code Daytii	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration		<u>Street Address:</u> Registration So	ection
Division of Corporations		Division of Corporations	
P.O. Box 632		The Centre of	
Tallahassee,	にし きなき 1年	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WC. Road 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 were filed on 12/31/2020 and assigned Florida document number L21000001761 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 "LLC." 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 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: New Registered Office Address: Enter Florida street address

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.

City

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
AMBR	Carmen J. Gonzalez	982 Derbyshire Dr.	□ Add
		Kissimmee, Florida 34758	□Remove
			☐ Change
			□Add
		□Remove	
			□Change
			□Add
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ote:	we date, if other than the date of filing:
record Lis fil	I 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 ed.
ated .	Richard Sofe

Typed or printed name of signee