K21000C43759

(Re	equestor's Name)	
(Ad	idress)	
		
(Ad	ddress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
. (Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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05/03/21--01004--002 **25.00

COVER LETTER

TO:

Registration Section

Divi	sion of Cor	porations		
		VING OF TAMPA LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	Articles of .	Amendment and feets) are sub	mitted for filing.	
		ndence concerning this matter	_	
r rease retirin	an concespo	indefice concerning this matter	to the following.	
		FRANQUIS HERRERA		
			Name of Person	
		D & C TOWING OF TAN	APA LLC	
			Firm Company	
		12864 JAN ST		
			Address	
		SAN ANTONIO, FL 3357	76	
			City/State and Zip Code	
		fdherrera1224@gmail.com	to be used for future annual report not	thestion)
For forther in	formation co	oncerning this matter, please co		(Transition)
FRANQUIS			813 417-9848 at ()	
	Name o	î Person	Area Code Dayun	ne Telephone Number
Enclosed is a	check for th	ie following amount:		
■ \$25.00 Fi	iling 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)
	ling Addres istration 5		<u>Street Address:</u> Registration Sc	ection
Div	ision of C	orporations	Division of Co	rporations
	. Box 632 ahassee, l		The Centre of 2415 N. Monre	raffahassee be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as (A Florida Limited Liabil	it now appears on our records.) ty Company)	
The Articles of Organization for this Limited Liability Company were	tiled on	and assigned
Florida document number 1.21000043759		
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 C	ompany," the designation "LLC" o	r 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:		
•		
• •		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(Mailing address MAY BE A POST OFFICE BOX) ———————————————————————————————————	ess on our records, <u>enter th</u>	e name of the new regi
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office addr	ess on our records, <u>enter th</u>	e name of the new regi
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office addr	ess on our records, <u>enter th</u>	e name of the new regi
• •	ess on our records, <u>enter th</u>	e name of the new regi
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office addragent and/or the new registered office address here: Name of New Registered Agent:	ess on our records, <u>enter th</u>	e name of the new regi
(Mailing address MAY BE A POST OFFICE BON) B. If amending the registered agent and/or registered office addragent and/or the new registered office address here:	ess on our records, <u>enter th</u> Enter Florida street address	- - -
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office addragent and/or the new registered office address here: Name of New Registered Agent:		

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 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>	Address	Type of Action
MGR	FRANQUIS HERRERA	12864 JAN ST	🗆 Add
		SAN ANTONIO, FL 33576	□Remove
			□Add
			□ Remove
			□Add
			□Remove
			□Change
		*	□ Add
			□Remove
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			☐ Change
			□Add
			□Remove
			□('hanse

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Filing Fee: \$25.00