## L21000153165

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## COVER-LETTER

2.

Tallahassee, FL 32314

	Registration Se Division of Corp		• •				
emp nec		MEGA ALEX TOWING, LLC					
SUBJEC	Γ:Name of Limited Liability Company						
The enck	osed Articles of a	Amendment and fee(s) are sub	mitted for filing.				
Please ret	urn all correspon	ndence concerning this matter	to the following:				
		ALEXEY ESPINOSA					
		<del></del>	Name of Person				
		MEGA ALEX TOWING I	.LC				
		<u> </u>	Firm/Company				
2045 E BAY DR APT 104							
		<del></del>					
		LARGO, FLORIDA 33771					
			City/State and Zip Code	<del></del>			
		blancalex76@gmail.com  E-mail address: (to be used for future annual report notification)					
For furthe	er information co	n-man address: (		incanon)			
ALEXEY	' ESPINOSA		239 2074019				
<del></del>	Name of	l'Person	at ()	ne Telephone Number			
Enclosed	is a check for th	e following amount:					
■ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Address		Street Address:				
	Registration S Division of Co		Registration Section Division of Corporations				
	P.O. Box 632	· · · ·	The Centre of	•			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

MEGA ALEX TOWING, LLC

The Articles of Organization for this Limited Liability Company were filed on 

[1.21000153165]

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

MEGA TILE & CONSTRUCTION SERVICES, LLC

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:

		Florida
New Registered Office Address:	Enter Florida street ad	dress
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 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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
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<u></u>			□Add
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			□Remove
			□Change
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			□Remove
			(Tit hange

Note:	tive date, if other than the date of filing:
If the reco record is f	ord 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 filed.
Dated	APRIL, 8TH 2024
Datet	EDT)

Typed or printed name of signee