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	COVER LETTER
TO: , Registration Section Division of Corporations	
SUBJECT: GR TO	Name of Lichited Liability Company  Indice(s) are submitted for filing.  Indigen this matter to the following:  Gilles Mo Rides  Name of Person  GR Towing USA LLC  Firm/Company  Address  City/State and Zip Code  Con 2025 Town Hond Com  E-mail address: (to be used for future annual report notification)  In matter, please call:  Area Code  at (954) 516 -8629  Area Code  Daytime Telephone Number  Town additional copy is enclosed)  Street Address:  Registration Section  Division of Corporations  The Centre of Tallahassec  2415 N. Monroe Street, Suite 810
The enclosed Articles of Amendment a	nd fee(s) are submitted for filing.
Please return all correspondence concer	ning this matter to the following:
	Gillermo Rivas  Name of Person
	GR TOWING USA LLC Firm/Company
	Address
-	City/State and Zip Code
<u> </u>	Con 20257 Q Yahro . Com E-mail address: (to be used for future annual report notification)
For further information concerning this	matter, please call:
Guillermo A	ivas ar (954) 516-8629
Name of Person	Area Code Daytime Telephone Number 🗀 💆
Enclosed is a check for the following a	. : T
	cate of Status Certified Copy Certificate of Status & Certificate of Status & Certified Copy
Mailing Address: Registration Section Division of Corporations	Registration Section
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee
rananassee, I L 32314	Tallabassae FL 22202

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GR	Towing USA L	LC				
( <u>Name</u>	of the Limited Liability Company as it now a (A Florida Limited Liability Comp	ppears on our records.) any)				
• .	Limited Liability Company were filed o	n 9/20/202	<u>-l</u> and assigned			
This amendment is submitted to ame	nd the following:					
A. If amending name, enter the ne	w name of the limited liability compar	n <u>y here</u> :				
The new name must be distinguishable and	contain the words "Limited Liability Company,"	the designation "LLC" or the abbr	reviation "L.L.C."			
Enter new principal offices addres	s, if applicable:		~>			
(Principal office address MUST BE		· · · · · · · · · · · · · · · · · · ·				
			53			
Enter new mailing address, if appl	licable:		: •			
(Mailing address MAY BE A POST			5.3			
			0			
B. If amending the registered ager agent and/or the new registered of Name of New Registered A		our records, <u>enter the name</u>	of the new registered			
New Registered Office Ad	droce:					
new regimered Office Ad-		Enter Florida street address				
		, Florida	. Florida			
	City:		Zip Code			
New Registered Agent's Signature, if	changing Registered Agent:					
provisions of all statutes relative t	s registered agent and agree to act in o the proper and complete performand on as registered agent as provided for	ce of my duties, and I am fa	miliar with and			

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
AMBA	Roland	to coro	2391 NW 96th TER	□Add
			Pembroko Pines, FL 330	<u>U</u> <b>⊘</b> Remove
				□Change
AHBR	Saulio C	Cu7	5375 NW 159 that with	<u> </u>
			MIAMI Lakes, FL 33014	□Remove
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If am	ending any othe	r information, en	ter change(s) here:	: (Attach additional s	heets, if necessary.)	
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lf an e <b>Note</b>	effective date is listed : If the date insert	ed in this <b>b</b> lock doe:	ific and cannot be prior	able statutory filing req	(optional) an 90 days after filing.) Pursuan uirements, this date will not	t to 605.0207 be listed as t
ic reco		iyed effective date, b	out not an effective ti	me, at 12:01 a.m. on the	e earlier of: (b) The 90th d	ay after the
Date	d <u>sept</u>	ambon 20	<u> </u>	<u>.                                    </u>		
		Signatui	re of a member or author	orized representative of a	nieniber	
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