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## **COVER LETTER**

	Registration So Division of Co			
SUBJEC		ning Roadside Service LLC		
SUBJEC		Name of Lin	nited Liability Company	
The encle	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Wilbert Vargas		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		Up N Running Roadside S	Name of Person  ning Roadside Service LLC  Firm/Company  entre St #1123  Address  ven, Florida 33880  City/State and Zip Code	
		<del> </del>	Firm/Company	<del>,</del>
		410 Citi Centre St #1123		
			Address	
		Winter Haven, Florida 338	380	
			City/State and Zip Code	
		tigerwil1@hotmail.com		
For furthe	er information c	E-mail address: ( concerning this matter, please c		rt notification)
Wilbert V	<sup>y</sup> argas		863 877-606 at ()	56
	Name o	f Person		aytime Telephone Number
Enclosed	is a check for th	he following amount:		
<b>≡</b> \$25.0	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 Addres Registration S		Street Addres Registration	
	Division of C		<del>-</del>	Corporations
ı	P.O. Box 632	27	The Centre	of Tallahassee
	Tallahassee, I	FL 32314	2415 N. Mc	onroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 OCT 17 AM 10: 12

Up N Running Roadside Service LLC

(Name of the Limited Liability Company as it now appears on our records.) TALLAMASSEE, FI

The Articles of Organization for this Limited I Florida document number 1.22000192726		ere filed on 04/22/2022	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liabili	ty company here:	
The new name must be distinguishable and contain the	words "Limited Liability	Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		<u> </u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or agent and/or the new registered office address	registered office add	dress on our records, <u>i</u>	enter the name of the new registered
Name of New Registered Agent:	Wilbert Vargas		
New Registered Office Address:	410 Citi Centre St	#1123	
		Enter Florida street (	nddress
	Winter Haven	<del>-</del>	Florida 33880
		City	Zip Code

## 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, <u>enter the title, name, and address of each person\_being added or removed from our records:</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Wilbert Vargas	410 Citi Center St #1123	\= Add
		Winter Haven, Florida 33880	□Remove
			□Change
			DAdd
			□ Remove
			□ Change
	<del></del>		□Add
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