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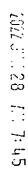
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

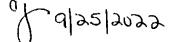
Office Use Only



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COVER LETTER

FO: Registration Section Division of Corporations
SUBJECT: BAY AREA HAULTING SERVICES L.L.C. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
LAZARO VALLADARES Name of Person
BAY AREA HAULTUG SERVICES C.L.C.
13266 BYRD DR. SUITE 100 #685
ODESSA FL 33556 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LAZARO VALADARES at (813) 841 - 6464 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$2.\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BAY AREA HAULING	SERVICES L.L.C. 2022, 128 11 7:46
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on $\frac{5/18/22}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or 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: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Finer Florida street address
	, Florida 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, 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
MGR	LAZARO VALLADARES	13266 BYRD Dr. SOUTE 100	XAdd
		#685	□Remove
	ODESSA FL 33556	□Change	
			□Add
		□Remove	
		□Change	
		□ Add	
		□Remove	
	1	□Change	
		□Add	
		□Remove	
		Change	
		□ Add	
		□ Remove	
		□Change	
			⊡Add
			□Remove
			Change

,, ii aiiiCl	eding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effective Note: I	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3) of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the not's effective date on the Department of State's records.
ecord is file	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 d.
Dated _	JUNE 14+H 2022
	All Control of the Co
	Signature of a member or authorized representative of a member
	BRANDON ARTS Typed or printed name of signee