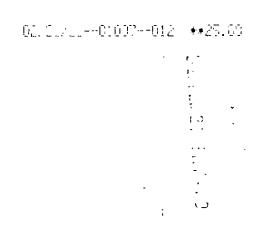
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COVER LETTER

TO: Registration Se Division of Cor			•		
E ARINA TO	OWING LLC				
SUBJECT: 💆	Name of Lim	ited Liability Company			
	Amendment and fee(s) are sub				
	Yalina Imas-Guerra				
		Name of Person			
	FARINA TOWING LLC				
		Firm/Company		-	
	13952 NE 147th Ter				
		Address		• • •	; · · ·
	Waldo, FL 32694				1
		City/State and Zip Code		•	2
	Yalınaımı E-mail address: (45 Q Gracil. Costo be used for future annual report notifi	cation)	-	- -
For further information co	oncerning this matter, please c	all:			: · · ·
Yalina Imas-Guerra		at 786, 301	2813 Telephone Number	:	C
Name of	Person	Area Code Daytime	Telephone Number	r	
Enclosed is a check for th	e following amount:				
\$\$ \$25.00 Filing Fee	Filing Fee S00.00 Filing Fee & S55.00 Filing Fee & S60.00 Certificate of Status Certified Copy Certific (additional copy is enclosed)		Certified	ate of State	
M.: Harry A. d. d		Stroot Address			

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

FARINA TOWING LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar		and assigned
Florida document number 1.23000016102		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited li</u>	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or t	he abbreviation "L.IC."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		[.,
	1 80.1.1	<u>r</u>
		521
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered offic- agent and/or the new registered office address here:	e address on our records, <u>enter the</u>	name of the new register
Name of New Registered Agent:	 	
New Registered Office Address:		
	Enter Florida street address	
	, Florid:	
	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 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	YALINA IMAS-GUERRA	13952 NE 147th Terr	■Add
		Waldo, FL 32694	□Remove
			ElChange
			□Add
			□Remove
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