

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : RC TAX SERVICE LLC
Account Number : I20140000083
Phone : (407)932-0040
Fax Number : (407)520-5473

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MGA TOWING & TRANSPORT LLC

Certificate of Status	0
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Estimated Charge	\$25.00

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Corporate Filing Menu

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FEB 10 2023

2023 FEB 14 PM 4:25

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MGA TOWING & TRANSPORT LLC
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:

MGA TOWING & TRANSPORT LLC
Name of Person

MGA TOWING & TRANSPORT LLC
Firm/Company

2018 VINCENT RD
Address

ORLANDO, FL 32817
City/State and Zip Code

MGATOWING@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JUAN FELIPE ARIAS 407 692 8747
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

MGA TOWING & TRANSPORT LLC

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

The Articles of Organization for this Limited Liability Company were filed on 02/01/2023 and assigned
Florida document number 92-2331846

This amendment is submitted to amend the following:

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

Name of New Registered Agent

New Registered Office Address

Enter 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:

State the date, name, and address of each person being added

AMBR = Authorized Member

Name

Address

Type of Action

AMBR

JULIANA LOPEZ RESTREPO

2018 Vincent Rd

Add

ORLANDO, FL 32817

☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change

Add

Remove

Change

Add

Remove

Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or printed text on the paper.

E. Effective date, if other than the date of filing: _____ (optional)

Effective date, if other than the date of filing: 10/1/2014 (optional)
(If an effective 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)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 02/14 2023

Juan Arias Arroyave
Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

ARLAS ARROYAVE, JUAN F

Typed or printed name of signee

Filing Fee: \$25.00