P08 00000 4703

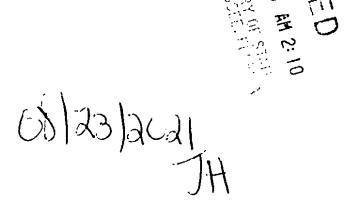
| (Requestor's Name) |
|---|
| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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JACENED

28억 AUG 23 PH 2:57

July 22, 2021

ELISSA N DENN P.O. BOX 842 MULBERRY, FL 33860 US

SUBJECT: RAPID TOWING SERVICES, INC.

Ref. Number: P08000004703

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

A post office box is not an acceptable address for the registered agent.

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 121A00014889

Jasmine N Horne Regulatory Specialist II

www.sunbiz.org

Articles of Amendment

| | to | | _ | FI | 11 - |
|--|--|---------------------------------|---|-----------------|-----------------------|
| | Articles of Inco | rporation | ED | 200. | LED 3 AM 2:10 |
| RAPID TOWING SERVICES INC | Vi | . • | | ZUZI AUG 2 | 3 44 |
| | F.C | | <u>AM 2:</u> | ko - | - AM 2:-In |
| \ <u></u> | of Corporation as currently | SECRETAR) | | 1/01 24 (6) | COF ST. |
| P08000004703 | | <u> </u> | <u> [[, f], </u> | | L. 77.77 |
| | (Document Number of C | Corporation (if kr | iown) | | |
| Pursuant to the provisions of section 607, its Articles of Incorporation: | 1006, Florida Statutes, this F | lorida Profit Cor _l | noration ac | dopts the follo | wing amendment(s) |
| A. If amending name, enter the new na | ame of the corporation: | | | | |
| | | | | | The second |
| name must be distinguishable and contain | the word "cornoration " "co | unnany " or "ince | rnorated" | or the abbrev | The new |
| "Inc.," or Co.," or the designation "C | Corp," "Inc," or "Co". A | professional corp | poration n | ame must co | ntain the word |
| "chartered," "professional association," | | | | | |
| D. Unter new principal office address | if applicables | | | | |
| B. Enter new principal office address, (Principal office address MUST BE A S | | | | | |
| <u> </u> | , | | | | |
| | | | | | |
| | | | | | |
| C. Enter new mailing address, if appli | icable: | | | | |
| (Mailing address MAY BE A POST) | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| If amending the registered agent an new registered agent and/or the ney | | ess in Florida, en | ter the nar | ne of the | |
| new registered agent and/or the nev | | | | | |
| Name of New Registered Agent | ELISSA N DENN | | | | |
| | TO THE PARTY OF TH | TO COMPANY (O | 121 fa | vestvicu |)In |
| | (Florida stree | et address) | • | . | |
| | laxeland | | | | 22811 |
| New Registered Office Address: | | | | , Florida | 33811 Zip Code) |
| | (0 | City) | | · · | Zip Code) |
| | | | | | |
| | | | | | |
| New Registered Agent's Signature, if c | | | -1.1: | | · |
| I hereby accept the appointment as regist | erea agent i am familiar wi | in and accept the | obugation | s oj me positi | on. |
| | | | | | |
| | | 4/2 | | | |
| | | X | | | |
| | Signature of New Reg | gistered A g ent, if | cnanging | | |

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| X Change | <u>PT</u> | <u>John Do</u> | <u>oc</u> | |
|-------------------------------|--------------|----------------|-------------------|-------------------|
| X Remove | Y | Mike Jo | mes | |
| X Add | <u>sv</u> | Sally St | nith_ | |
| Type of Action (Check One) | <u>Title</u> | | Name | Address |
| 1) Change | VP | | MICHAEL S DENN II | PO BOX 842 |
| Add | | | | MULBERRY FL 33860 |
| Remove | | | | |
| 2) Change | | | | |
| Add | | | | |
| Remove 3) Change | - | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| | | _ | | |
| Add | | | | |
| Remove | | | | |

| MOVE MICHAEL | ding additional Ar heets, if necessary). S DENN II EFFEC | TIVE 5/1/2021 | | | | |
|-------------------|--|------------------------------------|---------------------------------------|-------------------------------------|---------|--------------|
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| provisions for im | provides for an exc plementing the am ble, indicate N/A) | hange, reclassif endment if not | ication, or cane contained in the | ellation of issued amendment its | shares, | |
| | | | | | | _ |
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| The date of each amendment(s) date this document was signed. | MAY IST 2021) adoption: | _, if other than th |
|---|---|---------------------|
| | 5/21/2021 | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the | s block does not meet the applicable statutory filing requirements, this date will a Department of State's records. | not be listed as th |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were a action was not required. | adopted by the incorporators, or board of directors without shareholder action and s | hareholder |
| ☐ The amendment(s) was/were a by the shareholders was/were | adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. | |
| must he separately provided f | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): | |
| The number of votes cu | ast for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| 05/21/20 Dated | 21 | |
| selec | a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) | _ |
| | ELISSA N DENN | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |