P11000085222

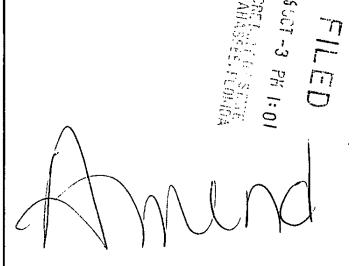
(R	equestor's Name)	1-111		
(Address)				
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(C	ity/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: CMW TOWING SE	ERVICE, INC		
DOCUMENT NUMBER:	P11000085222	-		
The enclosed Articles of An	nendment and fee are sub	mitted for filing.		
Please return all corresponde	ence concerning this matt	er to the following	ng:	
		ROSA ELEN	A LEON	
		Name of Conta	act Person	
		Firm/ Con	ıpany	
		16132 NW 14TH	COURT	
		Addre	ss	
***	PE	MBROKE PINES		
		City/ State and	Zip Code	
	ALFRE	DOLEON77@G	MAIL.CO	M
]	E-mail address: (to be use	ed for future annu	ial report r	notification)
For further information cond	perning this matter, please	e call:		
ROSA E	ELENA LEON	at (954	3436-0936
Name of Cor	ntact Person		Area Cod	e & Daytime Telephone Number
Enclosed is a check for the f	following amount made p	ayable to the Flo	rida Depar	rtment of State:
S35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43:75 Filing Certified Cop (Additional co enclosed)	у	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CMW TOWING SERVICE, INC.

CMW TOWING S	SERVICE, INC.		
(Name of Corporation as curren	tly filed with the Florida Dept. of State)		
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the follow	ing amendmer	nt(s)
A. If amending name, enter the new name of the corporation:			
		The new	
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name mu		
B. Enter new principal office address, if applicable:	2705 CANAL ROAD		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIRAMAR, FL 33025		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 360133	2016	
· · · · · · · · · · · · · · · · · · ·	MIAMI FL 33126-0133	C)	
	en en Outstand Outstand	: ώ Γ	*****
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office address		PH ::	ロフ
Name of New Registered Agent	JA.	· -	
(Florida s	treet address)	_	
New Registered Office Address:	, Florida		
	(City) (Z	ip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian		a.	
Signature of New	Registered Agent, if changing	_	

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)

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.

Example: XChange	<u>PT</u>	John Do	<u>ne</u>	
X Remove	<u>V</u>	Mike Je	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) X Change	PT		NERY A SANCHEZ MARTINEZ	1033 NE 127TH ST
Add				NORTH MIAMI FL 33161-4204
Remove				
2) X Change	VP		ALDER FERNANDEZ PEREZ	1033 NE 127TH ST
Add				NORTH MIAMI FL 33161-4204
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add		_		
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	<u></u>
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares.
provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(ij noi applicable, maicale IVA)	
	3.00

	SEPTEMBER 21, 2016	
The date of each amendment(s) a		, if other than the
date this document was signed.		
	SEPTEMBER 21, 2016	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more man 20 days after amenament fire date)	
Note: If the date inserted in this document's effective date on the De	plock does not meet the applicable statutory filing requirements, topartment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amend afficient for approval.	ment(s)
	proved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shar	eholder
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and sharehold	der
DatedSEP ⁻	TEMBER 27.2018	
(By a c	lirector, president or other officer - if directors or officers have not	
	d, by an incorporator – if in the hands of a receiver, trustee, or other	er court
appoir	ited fiduciary by that fiduciary)	
	NERY A. SANCHEZ MARTINEZ	
	(Typed or printed name of person signing)	-
	PRESIDENT/TREASURE	
	(Title of person signing)	