P17000020634

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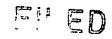
COVER LETTER

TO: Amendment Section

Division of Co	rporations		
NAME OF CORPO	ORATION: ALA TOWING C	ORP	
DOCUMENT NUM	D1700000000		
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.	
Please return all cor	respondence concerning this ma	itter to the following:	
	ALEXIS LASTRE ACOSTA	1	
		Name of Contact Person	n
		Firm/ Company	
	10610 NW 6 AVE		
		Address	
	MIAMI, FL 33150		·
		City/ State and Zip Cod	e
alex	xilastre@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
ALEXIS LASTRE		at (
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ailing Address		Address
	nendment Section		lment Section
	vision of Corporations D. Box 6327		n of Corporations Building
	llahassee, FL 32314		xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State) P17000020634 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amend its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevian "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) MIAMI. FL 33150	Iment(s) to
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(Principal office address MUST BE A STREET ADDRESS) MIAMI. FL 33150 C. Fater pay mailing address if applicable.	
C. Enter new mailing address, if applicable:	_
C. Enter new mailing address, if applicable:	_
(Mailing address MAY BE A POST OFFICE BOX)	
MIAMI, FL 33150	_
	_
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent ALEXIS LASTRE ACOSTA	
10610 NW 6 AVE	
(Florida street address)	
New Registered Office Address: 33150 , Florida	
(City) (Zip Code)	_

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: X Change	<u>PT</u> Jo	<u>ohn Doe</u>	
X Remove	<u>V</u> <u>N</u>	Aike Jones	
X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	FERMIN MONTERO	2294 NW 38 STREET
Add		· · · · · · · · · · · · · · · · · · ·	MIAMI, FL 33142
X Remove			
2) Change	<u>P</u>	ALEXIS LASTRE ACOSTA	10610 NW 6 AVE
<u>X</u> Add			MIAMI, FL 33150
Remove			
3 } Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ling additional Arti heets, if necessary).	(Be specific)			
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	provides for an excl	hange, reclassifica	ation, or cancellation	on of issued shares	1
<u>an amendment p</u>	plementing the ame	endment if not cor	ntained in the amer	idment itself:	
provis <u>ions for im</u> p	chile investorate Atlah				
an amendment provisions for important (if not applicate	inte, indicate (vizi)				
provis <u>ions for im</u> p	ine, maicale way				
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provis <u>ions for im</u> p	ine, macure ivizi)				
provis <u>ions for im</u> p	me, macure 1974)				

The date of each amendmen late this document was signed		, if other than th
	05/03/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements the Department of State's records.	s, this date will not be listed as th
adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes east for the ame ere sufficient for approval.	ndment(s)
	ere approved by the shareholders through voting groups. The following ed for each voting group entitled to vote separately on the amendmen	
"The number of vote	s east for the amendment(s) was/were sufficient for approval	
hv	(voting group)	
•	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and sh	nareholder
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder.	nolder
Dated	5/3/19	
Signature		
(1	By a director, president or other officer - if directors or officers have t	
	elected, by an incorporator – if in the hands of a receiver, trustee, or o appointed fiduciary by that fiduciary)	other court
и	ALEXIS LASTRE ACOSTA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	