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## **COVER LETTER**

	egistration Sec ivision of Corp			
cup ir ca		JVERY LLC		
SUBJECT	:		ited Liability Company	
The enclos	sed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please retu	irn all correspo	ndence concerning this matter	to the following:	
		ROBERTO A. LIMIA		
			Name of Person	
			Firm/Company	
		6425 WEST 27 COURT	APT # 201-6	
			Address	
		HIALEAH, FL 33016		
			City/State and Zip Code	
			to be used for future annual repo	ort notification)
For further	r information o	oncerning this matter, please c		
ROBERT	O A. LIMIA		at ()	542-3022
	Name o	f Person	Area Code	Daytime Telephone Number
Enclosed i	s a check for th	ne following amount:		
<b>■</b> \$25.00	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	d) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Tailing Addres		Street Addr Rogistratio	ess: on Section
Registration Section Division of Corporations			_	of Corporations
F	P.O. Box 632	.7	The Centr	e of Tallahassee
Т	Tallahassee, I	FL 32314	2415 N. M	Ionroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REGIS DE	ELIVERY LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears Liability Company)	on our records.)	
,	Ziaonti, company,		
The Articles of Organization for this Limited Liability Company	y were filed on	09/17/2021	and assigned
lorida document number			
This amendment is submitted to amend the following:			
a. If amending name, enter the new name of the limited lial	bility company her	<u>e</u> :	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the des	signation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	6425 WEST 27 C	OURT APT # 201-	6
Principal office address MUST BE A STREET ADDRESS)	HIALEAH, FL.	33016	
Enter new mailing address, if applicable:	6425 WEST 27 C	OURT APT # 201-	.6
Mailing address MAY BE A POST OFFICE BOX	HIALEAH, FL.	33016	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:		cords, <u>enter the nam</u> RTO A. LIMIA	e of the new regis
	6425 WEST 27 CO	URT APT # 201-6	7 /
New Registered Office Address:		la street address	
	HIALEAH	, Florida 😤	77.33016
	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

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>	<u>Address</u>	Type of Action
AMBR	GRETTEL LIMIA	6425 WEST 27 COURT — ΑΡΤ π 201-6	□Add
		HIALEAH, FL 33016	≣Remove
			□Change
AMBR	ROBERTO A. LIMIA	6425 WEST 27 COURT APT # 201-6	≣Add
		HIALEAH, FL 33016	□Remove
			□Change
			Remove
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an effecti lote: If	the date is listed, the date must be the date inserted in this block	specific and does not m	cannot be prior neet the applica	io date of filing ( ible statutory f	or more than 90 c iling requirem	lays after fil ents, this d	ing.) Pursuant ate will not b	to 605.02 ie listed :
	t's effective date on the Depa							
			an effective tir	ne, at 12:01 a.	m, on the earli	er of: (b)	The 90th day	y after th
record s	specifies a delayed effective d	ate, but not						
record s d is filed.	OCTOBER 2		2021	·				
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Filing Fee: \$25.00