L23000515457

(Requ	iestor's Name)	
(Addr	ess)	····
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(City/s	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Docu	iment Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ling Officer:	





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COVER LETTER

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end m	BAGUET	TE EXPRESS TRANSPORTA	TION, LLC	
ronar		Name of Lin	nited Liability Company	
The end	closed Articles o	f Amendment and fee(s) are sub-	omitted for filing.	
		ondence concerning this matter		
		MECK DUBIQUE		
			Name of Person	
		BAGUETTE EXPRESS T	RANSPORTATION, LLC	
			Firm/Company	
		1313 NW 97 TERRACE		
		· · · · · · · · · · · · · · · · · · ·	Address	A M
		CORAL SPRINGS, FL 33	071	
		myrianikrcyol(a/yahoo,com	City/State and Zip Code	
		E-mail address, (to be used for future annual repor	t notification)
For furt	her information	concerning this matter, please c	all;	
МЕСК	DUBIQUE		954 682-676	50
	Name	of Person	Area Code D	aytime Telephone Number
Enclose	ed is a check for	the following amount:		
□ \$25	5.00 Filing Fee	万里 \$30.00 Fring Fee & Certificate of Status	**D \$55.00 Fling Fee & Certified Copy radditional copy is enclosed	Sou.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addre		Street Addre	
Registration Section Division of Corporations P.O. Boy 6327		Registration		
		Division of Corporations		

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BAGUETTE EXPRESS TRANSPORTATION, 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 11/14/2023 and assigned Florida document number L23000515457 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 "LLC" 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

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.

City

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

Title	Name	Address	Type of Action
MGR MECK DUBIQUE	1313 NW 97 TERRACE	■Add	
		CORAL SPRINGS, FL 33071	
		DChange	
			CJAdd
		□Remove	
		□Change	
		DAdd	
		□Remove	
		□Change	
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			□Change
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			<i>(</i> 7)/21

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E. Effective date, if other than the da (If an effective date is fisted, the date must be <u>Note:</u> If the date inserted in this block document's effective date on the Depa	specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3 does not inject the applicable statutory filing requirements, this date will not be listed as the
If the record specifies a delayed effective de record is filed.	nte, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
NOVEMBER 20 Dated	2023
Dated	-P/2
	nature of a member or authorized representative of a member
	nature of a member of antiborized representative of a member
MECK DUBIQUE	
	Typed of printed name of signee

Filing Fee: \$25.00