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SECRETARY OF STATE

N. Owner JUL 2 0 2010

COVER LETTER

TO: Registration Division of	n Section Corporations	
SUBJECT:	GOODS DELIVERY LLC Name of Limited Liability Company	
	Name of Limited Liability Company	
	·	
The enclosed Articles	s of Amendment and fee(s) are submitted for filing.	
Please return all corre	espondence concerning this matter to the following:	
·	ORLANDO LUNA-VICTORIA	
	Name of Person	
	GOODS DELIVERY LLC	
	Firm/Company	
	11213 NW 14 CT	
	Addiess	
	PEMBROKE PINES FL 33026 City/State and Zip Code Goods delivery 2010 @ Yahoo.com E-mail address: (to be used for future annual report notification)	
	City/State and Zip Code	
	GOODS delivery 2010 & TAhoo.com	
Til Oak CON	on concerning this matter, please call:	
JUON CAN	ne of Person at (954) 297 7692 Area Code & Daytime Telephone Number	
	ne of Person Area Code & Daytime Telephone Number	
Enclosed is a check f	or the following amount:	
\$25.00 Filing Fee	\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	sed

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED 10 JUL 19 AMII: 39

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 07 13 2010 and assigned Florida document number 1 10000 73 656 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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviat "L.L.C." Enter new principal offices address, if applicable:		Or	•	. o out 19	AM 11: 39
Florida document number 100000 73 65 6 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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviat "L.L.C." 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 n registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	(Name of the Limited Liability (A Florida L	ELIUE Company as it no limited Liability Co	w appears on ompany)	13 E 128 T 4 E	OF STATE FLORIDA
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(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 n registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liabili	ty Company,"	the designation "LLC	C" or the abbreviation
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Name of New Registered Agent: New Registered Office Address:	(Mailing address MAY BE A POST OFFICE BOX)				
Name of New Registered Agent: New Registered Office Address:					
New Registered Office Address:			ess on our t	records, enter the	name of the new
	Name of New Registered Agent:				
Enter Florida street address	New Registered Office Address:				
			Enter F	Torida street addre.	27.
, Florida			·	, Florida	
City Zip Code		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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGR .:	ORLANDO LUNA-VICTORIA	11213 NW 14 CT PEMBROKE PINES FL 33026	Add Remove
· ············			Add Remove
TOTAL - COLOR			Add Remove
			Add Remove
·			Add Remove
·			Add Remove
D. If amendin	ng any other information, enter change((s) here: (Attach additional sheets, if necessary.)
		ALLAHASSEE, FLO	FILED 10 JUL 19 AMII: SEURETARY OF ST
	july 14, 20	10.	39 39
	Signature of a member of	Prauthorized representative of a member	
_		r printed name of signee	

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Filing Fee: \$25.00