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COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: At your Door Dalivery limited liability company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Micholas Rhoden Name of Person
At your Door Dalivery LLC Firm/Company
1769 NW 81 Way
Plantation FL 33322 3 PROPERTY City/State and Zip Code
E-mail address: (to be used for future annual report hotification)
F-mail address: (to be used for future annual report hotification) For further information concerning this matter, please call:
Name of Person at (770) 696 0260 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\begin{align*} \begin{align*} \b
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 OF

The Articles of Organization for this Limited Liability Company were filed on 01/24/2017 and assigned Florida document number 1700018979. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: POWA Drivan LLC 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: 1769 N.W. 81 W.94	(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) iability Company)
A. If amending name, enter the new name of the limited liability company here: POWLY Drivan LLC 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:		were filed on $01/24/2017$ and assigned
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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:	• • •	Plantation FL 33822 = PM
Name of New Registered Agent: 17/5 to los Rhobar	- · · · · · · · · · · · · · · · · · · ·	R 10 PH 3: 26
17/0		
New Registered Office Address: 1769 NIM RIVIAL	Name of New Registered Agent:	nolas Rhodan
Enter Florida(street address	New Registered Office Address: 1769 N	
Planton, Florida 33522 City Zip Code	Mante	

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 = M $AMBR = A$	Ianager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	optional) after filing.) Pursuant to 605.0207 , this date will not be listed as
the record specifies a delayed effective date, but not an effective time, at 12:0 The 90th day after the record is filed.	01 a.m. on the earlier of
Dated, Signature of a member or authorized representative of a member	
waste to Plantage	<u> </u>

Page 3 of 3

Filing Fee: \$25.00