

**L17000173392**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (850) 617-6383

From:  
Account Name : LEGALZOOM.COM INC.  
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Phone : (323) 962-9600  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
FLOWERS EXPRESS LLC**

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

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MAR 24 2020

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Flowers Express LLC  
Name of 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:

Cheyenne Mosley

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N Brand Blvd 11th fl

Address

Glendale, CA 91203

City/State and Zip Code

BrandonJMcG33@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheyenne Mosley

Name of Person

at ( 800 )

Area Code

773-0888

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☒ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**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**

**Flowers Express LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

08/14/2017

The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ and assigned

Florida document number L17000173392

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

**MSBM Transportation Solutions LLC**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

*(Principal office address MUST BE A STREET ADDRESS)*

4889 NW 59th way

Coral Springs, Florida 33067

**Enter new mailing address, if applicable:**

*(Mailing address MAY BE A POST OFFICE BOX)*

4889 NW 59th way

Coral Springs, Florida 33067

**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*

\_\_\_\_\_, Florida \_\_\_\_\_

*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>	<u>Type of Action</u>
AMBR	Brad E. Flowers	3541 NW 7th st Fort Lauderdale, FL 33311	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Brandon McGee	4889 NW 59th way Coral Springs, Florida 33067	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
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2020 MAR 23 AM 10:20

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated March 13th, 2020



Signature of a member or authorized representative of a member

Brandon McGee

Typed or printed name of signee

850-617-6381

3/10/2020 12:26:14 PM PAGE 1/001 Fax Server



March 10, 2020

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FLOWERS EXPRESS LLC  
3541 NW 7TH ST  
FORT LAUDERDALE, FL 33311US

SUBJECT: FLOWERS EXPRESS LLC  
REF: L17000173392

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

DOCUMENT NUMBER IS INCORRECT. IT SHOULD BE L17000173392

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker  
Regulatory Specialist III

FAX Aud. #: H20000072868  
Letter Number: 920A00005257