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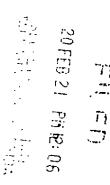
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COVER LETTER

TO: Registration Section

Div	ision of Cor	porations	ن نو	
CUBICCT	ForexDrive	LLC	•	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	1 Articles of	Amendment and fe c (s) are sub	mitted for filing.	
		ndence concerning this matter	-	
r rease return	i an correspo	nacioc concenting this matter	to the following.	
		Huldarico Ortiz		
			Name of Person	
		ForexDrive LLC		
			Firm/Company	
		15900 Haynie Ln	•	
			Address	
		Jupiter FL 33478		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
		entrenous6340@yahoo.d	om to be used for future annual repo	t patification)
For further in	nformation o	oncerning this matter, please c	·	t notification)
Rico Ortiz			954 253-01	57
	Name o	f Parson	at ()	aytime Telephone Number
	ivanie o	i i cison	Area Ciale 12	ayume releptione sumber
Enclosed is a	a check for th	e following amount:		
≘ \$ 25.00 F	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)
	iling Addres		Street Addre	
	gistration S vision of C	section orporations	Registration of	n Section Corporations
	D. Box 632			of Tallahassee
Tal	llahassee, F	FL 32314	2415 N. M	onroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ForexDrive LLC				
(Name of the Limit	ed Liability Compa (A Florida Limited	any as it now appears on the Liability Company)	our records.)	
The Articles of Organization for this Limited Li	ability Company	were filed on 06/10/2	2019	_ and assigned
Florida document number L19000152942	<u> </u>			
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liab	oility company here:		
Sagey Driving Gervices LLC	eu Ariv	ex Service	5 61C	
he new name must be distinguishable and contain the	ords "Limited Liabi	lity Company," the design:	ation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applic	able:	N/A		
Principal office address MUST BE A STREE	T ADDRESS)			20
			·	<u></u>
			.	(C)
nter new mailing address, if applicable:		N/A	,	
Mailing address MAY BE A POST OFFICE	BOX)			ニュラ
			·	<u> </u>
				or
 If amending the registered agent and/or r gent and/or the new registered office addres 		address on our recor	ds, <u>enter the name o</u>	of the new registe
gent and/or the new registered office address	<u>s nere</u> .			
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
		Enter Florida st	reet 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 heing 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>	Name	<u>Address</u>	Ī	ype of Action
Title	· · · · · · ·			□Add
•				□Remove
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ffective date, if other than the an effective date is listed, the date in lote: If the date inserted in this ocument's effective date on the	block does not	meet the appli	cable statutory	or more than 90 filling requirem	(optional days after fili ents, this da	al) ing.) Pursu ate will n	ant to 605. ot be liste	.020 ed a
record specifies a delayed effect is filed.	ve date, but no	ot an effective	time, at 12:01 s	.m. on the earl	er of; (b)	The 90th	. day after	r the
02/14 ated	<u> </u>	· <u>2020</u>						
	4	7/2						

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)