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## **COVER LETTER**

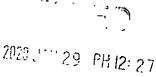
	Registration Se Division of Cor				
SUBJEC		ier Service, LLC			
SOBJEC	···	Name of Limi	ited Liability Company		
The enck	osed Articles of .	Amendment and fee(s) are sub-	mitted for filing.		
Please re	turn all correspo	Name of Limited Liability Company  rticles of Amendment and fee(s) are submitted for filing.  correspondence concerning this matter to the following:  India Smith  Name of Person  Smith Courier Service, LLC  Firm/Company  115 112th Avenue NE, Apt 113  Address  St. Petersburg, FL 33716  City/State and Zip Code issmith1188@gmail.com  E-mail address: (to be used for future annual report notification)  rmation concerning this matter, please call:    T27			
		India Smith			
			Name of Person		
		Smith Courier Service, LL	С		
Firm/Company					
	115 H2th Avenue NE, Apt 113				
			Address	<del></del>	
		St. Petersburg, FL 33716			
		• • •	City/State and Zip Code		
			to be used the fitting appeal corner politic	gation)	
For furth	ar information a		-	canony	
		oncerning this matter, please ca			
India Sn			at ()		
	Name of	f Person	Area Code Daytime	Telephone Number	
Enclosed	l is a check for th	ne following amount:			
<b>■ \$2</b> 5.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Addres	<u>s:</u>	Street Address:	tion	

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

TO:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Smith Courier Service, 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 November 4, 2019 \_\_\_\_ and assigned Florida document number <u>L 19000275303</u> 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Muiling 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.

Cuv

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>	Type of Action
CEO	Jarrell Solomon	115 112th Avenue NE, APT 113	<b>∃</b> Add
		Saint Petersburg, FL 33716	□Remove
			□Change
AMBR India Smith	India Smith	115 112th Avenue NE, APT 113	□Add
		Saint Petersburg, FL 33716	□Remove
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(If an effectiv	e date, if other than the date of filing:	Pursuant to 605.02 will not be listed
	nt's effective date on the Department of State's records.	
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