L200000 28/01

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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:	FERRER I	DELIVERY LLC		
SUBJECT:		ited Enability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing		
Please return all correspo	ondence concerning this matter	to the following		
	ERNE	STO FERRER	GOMEZ	
		Name of Person DELIVERY L Firm/Company		
	6824 W P	Address he		
		City/State and Zip Code	1/12 621 72	
	E-mail address (OMEZIGNO TO THE CONTROL OF THE CONTR	ication)	in the second
For further information c	concerning this matter, please ca	all	, . m F	, , , ,
ERNESTO F	ERRER GOME	EZ at 1 813 , 399 -	7955 -:	7097 02 4415 t
Name o	of Person	Atea Code Daytime	terephone Number #.	
Enclosed is a check for the	he following amount			••
≨\$25 00 Filmg Fee	□ \$30,00 Filing Fee & Certificate of Status	☐ \$55 00 Filing Fee & Certified Copy (additional copy is enclosed)	 S60 00 Filing Fee. Certificate of Status & Certified Copy radditional copy is enclosed) 	
<u>Mailing Addres</u> Registration (<u>Street Address:</u> Registration Sec	etion	
Division of C	lorporations	Division of Corp	porations	
P.O. Box 632 Tallahassae		The Centre of T	attanassee · Street Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FERRER D	ELIVE	RY LLC			
(Name of the Limited	Liability Company V Florida Limited Li	v as it now appears on ability Company)	our records.)		
The Articles of Organization for this Limited Lial Florida document number <u>L200000</u>		vere filed on <u>OU</u>	122/2020	and assigned	
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liabil	ity company here:			
The new name must be distinguishable and contain the wor	rds "Limited Liabilit	y Company," the desig	nation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applical	ble:				
(Principal office address MUST BE A STREET	<u>ADDRESS)</u>				_
		-		<u> </u>	<u></u>
Enter new mailing address, if applicable:					بر نج ارین اب ا
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>			——————————————————————————————————————	35
				<u>cn</u> 13	
B. If amending the registered agent and/or regagent and/or the new registered office address	here:				
Name of New Registered Agent:	ERNI	ESTO FE	RRER	GOMEZ AS AVE	
New Registered Office Address:	6824	W PŌC Enter Florida .	AHONT street address	AS AVE	_
				33634 Zup Code	_
New Registered Agent's Signature, if changing Re	gistered 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>	Address	Type of Action
MGR	ERNESTO FERRER 6	DOMEZ 6814 W POCAHONTAS AVE	&Add
		Tampa FL 33654	□Remove
			□Change
MGR	ERNESTOF, SR FERK	RER GOMEZ	
		6824 W POCAHONTAS	Kemove
		AVE Tumpa FL 3363	
			□Add
			BRemove
			□Add
			□Remove
			I Change
			□Add
			□Remove
			DChange
			JAJd
			□Remove
			□Change

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Note: If the	ite, if other than the da date is listed, the date must be date inserted in this block effective date on the Depar	does not meet	t the applicable	te of filing or more statutory filing o	than 90 days after equirements, thi	onal) tiling (Pursuant to s date will not be	605 020 Tisted a:
uocument s	Treetive date on the Depar	unche or state	c 3 records				
e record sper rd is filed	nties a delayed effective da	ite, but not an	effective time,	at 12:01 a.m. on	the earlier of th	o) The 90th day	after the
Dated	2/11/202	<u> </u>					
		4	War.				
_							_
	Sig	nature of a men	Fer or authorize	I representative of	a member		

Filing Fee: \$25.00