120000/72706

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/s	State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Busin	ness Entity Nam	e)
(Доси	ıment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fil	ing Officer:	
		ļ

Office Use Only



300351338233

09/03/20 - 01012: 00: **50.00

12 84 -2 51 6:0

OCT 1 4 2020

COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

EXPRESS, LLC		
Name of Lim	nited Liability Company	
Amendment and fee(s) are sub	omitted for filing.	
ndence concerning this matter	to the following:	
Lester F. Muhammad Jr		
	Name of Person	
BY-WAYS EXPRESS, LI	l.C	
	Firm/Company	
5725 17TH WAY S Apt C		
	Address	
ST. Petersburg, FL 33712		
foundationent400@gmail.c	City/State and Zip Code om	
E-mail address: (to be used for future annual report notifi-	cation)
oncerning this matter, please co	all:	
	727 851-1493	
Person		Telephone Number
e following amount:		
☐ \$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)
Section	<u>Street Address:</u> Registration Sect	
	Amendment and fee(s) are subsidered concerning this matter. Lester F. Muhammad Jr. BY-WAYS EXPRESS, LI 5725-17TH WAY S Apt C ST. Petersburg, FL 33712 foundationent400@gmail.c E-mail address: (concerning this matter, please concerning this matter.) Person e following amount: S30.00 Filing Fee &	Amendment and fee(s) are submitted for filing. Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Lester F. Muhammad Jr Name of Person BY-WAYS EXPRESS, LLC Firm/Company 5725 17TH WAY S Apt C Address ST. Petersburg, Fl. 33712 City/State and Zip Code foundationent400@gmail.com E-mail address: (to be used for future annual report notification for this matter, please call: Person at (727 at (722

2415 N. Monroe Street, Suite 810 Tallahassee. FL 32303

The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BY-WAYS EXPRESS, LLC

1.238... -3 50 500

(Name of the Limited Lia (A Flo	<mark>bility Compan</mark> rida Limited Li	i <mark>v as it now appears</mark> iability Company)	s on our records.)			
he Articles of Organization for this Limited Liability forida document number <u>L20000172706</u>	y Company v 	were filed on June	e 22, 2020 and assigned			
his amendment is submitted to amend the following	:					
. If amending name, enter the new name of the l	imited liabil	lity company her	<u>re</u> :			
ne new name must be distinguishable and contain the words "I	 Limited Liabilii	ty Company," the de	signation "LLC" or the abbreviation "L.L.C."			
nter new principal offices address, if applicable:		5725 17TH WAY S Apt. C				
e Articles of Organization for this Limited Liability Company varida document number L20000172706 is amendment is submitted to amend the following: If amending name, enter the new name of the limited liability new name must be distinguishable and contain the words "Limited Liability ter new principal offices address, if applicable: eincipal office address MUST BE A STREET ADDRESS) Iter new mailing address, if applicable: ailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address here: Name of New Registered Agent: Lester F. Muham	ST. Petersburg, F	F1. 33712				
nter new mailing address, if anniicable:		5725 17TH WAY S Apt. C				
ner new maning address, it applicable: <u>Sailing address MAY BE A POST OFFICE BOX)</u>		ST. Petersburg, FL 33712				
			···			
gent and/or the new registered office address her	<u>e</u> :		cords, enter the name of the new regi			
New Registered Office Address: 573	5725 17TH WAY S Apt. C					
		Enter Florie	da street address			
ST	. Petersburg	City	, Florida = 33712 Ziv Code			

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 Cours - 3 FM Str	0 Type of Action
MGR	Lester F. Muhammad Jr	5725 17TH WAY S Apt. C	□Add
-		ST. Petersburg. FL 33712	C.v.
		·	■ Change
			□Add
			□Remove
			□ Change
			□ Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□ Add
		<u>-</u>	□Remove
			□Change
			□Remove
			□Change

							1.776.		<u> </u>		
								٠, ١,	: 5: 00		
				. <u> </u>							
_						<u>.</u>	_		_		
							<u> </u>				
											
		_									
						-					
	<u> </u>						<u></u>	<u>.</u>			
	_										
							<u>-</u>	•			
				_	<u> </u>			· · - ·			
								<u></u>			
		<u> </u>									
	_					 -		-	-	-	
ective 1 effecti	date, 11 othe ive date is listed.	r than the da	e of filing specific and	cannot be n	rior to date	of filing or	more than 9	(option	o nal) - filina) Purs	nemt to 605 ()	207
<u>te:</u> 11 1	ine date inserte	a in this block	does not m	ieet the app	plicable st	atutory fili	ng require	ments, this	s date will	not be listed	las
ument	's effective da	te on the Depai	tment of S	tate's reco	rds.						
ecord sp is filed.	pecifies a delay	ed effective da	te, but not	an effectiv	e time, at	E2:01 a.m	on the ea	rlier of: (b) The 90t	h day after t	he
s mea.											
ted			•	-	·						
				Jan	11.0	7					
		Sig	nature of a n	nember or a	uthorized r	epresentativ	e of a mem	ber			
	Lester F. Mu										