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SECRETARY OF STAIR

A. BUTLER MAY 14 2022

COVER LETTER

Altention Robert Stanton

TO:

Registration Section Division of Corporations

SUBJECT: Anything Delivery LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all conespondence concerning this matter to the following:

Martha Davs-Turnquest
Name of Person
Anything Delivery LLC
Firm Company
424 N.W. 10th A-VE
Address
Fort. Landerdale, F1 33311
City State and Zip Code
innycareal & gmail. com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Martha Days - Turnquest 754, 204-3307

Name of Person Area Code Daytime Telephone Number

briefosed is a check for the following amount:

T. \$25 00 Filing 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 & Alve Add
Certified Copy
(additional copy is enclosed)
VIA

VIA Check

Mailing Address:

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

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

FILED

2022 MAY 13 PM 2: 19

A	7055 HH 1 12 PH 2: 19
Anything Deliver	
(Name of the Limited Liability Compan (A Florida Limited Li	is as it now appears on our records. I MCLR.15.3.5EF, FI
The Articles of Organization for this Limited Liability Company of Plorida document number 200021	were filed on $\frac{4 15 2022}{4 15 3}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil Roads Logishes Limited Liability The new name must be distinguishable and contain the words "Limited Liability	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	n/A
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	ldress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	n A
New Registered Office Address:	Enter Florida street address
- <i>f</i>	, Florida
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 Type of Action <u>Address</u> Title <u>Name</u> $\square Add$ □Remove □ Change \square Add □Remove □Change □Remove _____ □Change _____ LIRemove Remove _____ □Change __ 🗆 Remove

_____ □Change

i aitiein	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	_
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fective	re date, if other than the date of filing:	
ote: if	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list)5.0207 sted as
ocumen	nt's effective date on the Department of State's records.	
record s	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day aft	er the
Lis filed	/ 1	
ated _	Jaun Man Turnent Signature of a member or authorized representative of a member 1	
	Marita Name turient	
	Signature of a member or authorized representative of a member Martha Days Turnquest	

Filing Fee: \$25.00



May 10, 2022

MARTHA DAVIS-TURNQUEST 424 N.W. 10TH AVE FORT LAUDERDALE, FL 33311

SUBJECT: ANYTHING DELIVERY, LLC

Ref. Number: L20000210113

We have received your document for ANYTHING DELIVERY, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "Limited Company" or Limited Liability Company or with one of the following abbreviations Ltd. Co., LC, "L.C.," LLC, or L.L.C.

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.

Letter Number: 222A00010767

Anissa Butler Regulatory Specialist II

www.sunbiz.org

RECEIVED



2022 APR 19 AM 2: 07

FLORIDA DEPARTMENT OF STATE
Division of Corporations SE

SECRETARIA STATE

April 12, 2022

MARTHA DAVIS-TURNQUEST 424 N.W. 10TH AVE FORT LAUDERDALE, FL 33311

SUBJECT: ANYTHING DELIVERY, LLC

Ref. Number: L20000210113

We have received your document for ANYTHING DELIVERY, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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.

Anissa Butler Regulatory Specialist II

Letter Number: 022A00008475