L20000221377

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer	
Opecial instructions to r	iing Onicer.	

Office Use Only



200414059762

08/17/23--01014--011 **30.00

TECHS VARY OF STAT

COVER LETTER

TO:

Registration Section

Division of Corporations		
ETT EXAMPLE	1.00 / 10	
Name of Lim	ited Liability Company	· -
Amendment and fee(s) are sub	mitted for filing.	
ndence concerning this matter	to the following:	
JAVALI	N LOVETT	
	Name of Person	
LOVETT EXPR	ESS /NC LLC	
	Firm/Company	
2600 NW 49711	AVENUE APT # 105	
	Address	
LAUDERDALE LA	IKES. FLERIDA 33	313
	engristate and rap code	
Jove + texpress	@gmail.com	ifications
		meanony
TT	at (<u>954</u>) <u>696-6</u>	6/56
Terson	raca code trayun	не тетерионе манивет
e following amount:		
S30.00 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)
<u>u</u> ection	<u>Street Address:</u> Registration Se	ection
orporations	Division of Co	rporations
7 T. 32314		Fallahassee be Street, Suite 810
	Name of Lim Amendment and fee(s) are substituted and fee(s) are substitute	Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: TAVALIN LOVETT

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



(A Florida Limited Li	ability Company) SECRETARY OF STATE
(A Florida Limited Li The Articles of Organization for this Limited Liability Company v	vere filed on July 27, 2028EE, and assigned
Florida document number <u>L 20000 221377</u>	•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
LOVETT EXPRESS LLC	
The new name must be distinguishable and contain the words "Limited Liabili	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	,
Enter new mailing address, if applicable:	\sim \sim \sim \sim \sim
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	ldress on our records, <u>enter the name of the new registered</u>
	\mathcal{N}/Δ
Name of New Registered Agent;	
New Registered Office Address:	Enter Florida street address
	, Florida City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	(4)
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as pakening filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is address, I hereby confirm that the limited liability

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
	N/A		□Add
			□ Remove
	1 /		□Change
N/A			
		□Remove	
			□Change
N/A		□Add	
		□Remove	
	N/A		□Change
	/V / /\	_	
N/A	 -	□Remove	
		□Change	
		□Add	
			□Remove
N/A		□Change	
	_	□Add	
			□Remove
			□Change

Page 2 of 3

	$\Lambda//A$
	/\/
(If an e <u>Note</u>	tive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	$\frac{8/14/23}{}$
	Signature of a member or authorized representative of a member
	TAVALIN LOVETT Typed or printed name of signee