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WALK IN

		PICK UI	: _12/16	5/2020	
		CERTIFIED COPY			
	хx	РНОТОСОРУ			
		CUS			
	хх	FILING	LLC AMEND	MENT	
1.		JEUDY EXPRESS LLC (CORPORATE NAME AND DOCUMENT	 		
2.		(CORPORATE NAME AND DOCUMENT			
3.		(CORPORATE NAME AND DOCUMENT			
4.		(CORPORATE NAME AND DOCUMENT)		
5.		(CORPORATE NAME AND DOCUMENT	······································		
6.		(CORPORATE NAME AND DOCUMENT	;)		
	ECIA TRU	L CTIONS:			

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT:	Jeuc	dy Express LLC	
		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
		Joseph Jeudy	
		Name of Person	
		Firm/Company	
		4167 oak terrace dr	
		Address	
	(Greenacres fl 33463	
		City/State and Zip Code	
		eudy@gmail.com to be used for future annual report notif	ication)
For further information c	concerning this matter, please c	·	,
Joseph Je		at (_561)727456	02
Name o	of Person	Area Code Daytimo	: Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$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)
Registi Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURII Registration Section Division of Corpora Clifton Building	n

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

TO ARTICLE'S OF ORGANIZATION OF

J	eudy Express LLC		
(Name of the Limited Li (A Fl	iability Company as it now appears (forida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liabili Florida document numberL20000373369	ity Company were filed on	Nov 30, 2020	and assig
This amendment is submitted to amend the followin	ng:		
A. If amending name, enter the new name of the	limited liability company here	<u>e</u> :	
The new name must be distinguishable and contain the words	"Limited Liability Company," the des	ignation "LLC" or the abl	breviation "L.L.
Enter new principal offices address, if applicable	e:4167 oak ter	race dr greenacre	
(Principal office address MUST BE A STREET A	DDKESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO.	<u></u>		(7)
			מי
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on e address here:	our records, <u>enter</u>	the name-o
Name of New Registered Agent:			
New Registered Office Address:		ak terrace dr da street address	
	Greenacres	, Florida	33463
-	City		Zip Code

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 complete performance of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docubeing 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 Agen

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of A
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Effective date, if	other than the date of filing:		(optional)	nt to 601
		not be prior to da	e of filing or more than 90 days after filing.) Pursua statutory filing requirements, this date will no	t be list
Note: If the date	ive date on the Department of State	's records.	,	
30cument s effect	ive date on the Department of the			
			of althoughton at 13:01 a.m. on the	a aarli
ne record spec	ifies a delayed effective date	, but not ar	effective time, at 12:01 a.m. on the	2 66111
The 90th day	after the record is filed.			
Dated	December 15	2020		
)aled			Selection	
	Signature of a mem	ber or authorize	representative of a member	
			•	
		Joseph	Jeudy	
	Ťv	ped or printed na	me of signee	
	- J			

Page 3 of 3

Filing Fee: \$25.00