L7 ID0004556

| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| (|
| (C) (C) 12 (7) (10) 200 H) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| (Document) |
| C. M. Land Change |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| |
| |
| |

Office Use Only



900374985909

11/02/21--01002--015 **30.00

RECEIVED

NOV 0.3 2027

ACCESS,

CORPORATE When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

| | PIC | K UP: | 11/2 DANNY | _ |
|---------------|--------------------------|----------|------------|-------------|
| XX | CERTIFIED COPY PHOTOCOPY | | | |
| XX | CUS | GS | | |
| xx | FILING | LLC | AMEND | |
| | EUDY EXPRESS LLO | | | |
| (C | ORPORATE NAME AND DOCU | JMENT #) | | |
| (C | ORPORATE NAME AND DOCU | JMENT #) | | |
| (C | ORPORATE NAME AND DOCU | JMENT #) | | |
| (C | ORPORATE NAME AND DOCU | JMENT #) | | |
| (C | ORPORATE NAME AND DOCU | JMENT #) | | |
| CIAL FRUCT | TIONS: | | | |

COVER LETTER

| Division of C | orporations | | | |
|--------------------------|---|---|---|--|
| SUBJECT: | Jeuo | ly Express LLC | | |
| | | nited Liability Company | | |
| The enclosed Articles of | of Amendment and fee(s) are sub | omitted for filing. | | |
| Please return all corres | pondence concerning this matter | to the following: | | |
| | | Joseph Jeudy | | |
| | | Name of Person | | |
| | | Firm/Company | | |
| | 1301 sw 10th ave apt B 102 | | | |
| | | Address | | |
| | | Delray beach fl 33444 City/State and Zip Code | - | |
| | E-mail address: (| adyexpress@gmail.com to be used for future annual report not | ilication) | |
| For further information | concerning this matter, please c | all: | | |
| Joseph J | leudy | at (_561)710- | 9400 | |
| Name | of Person | Area Code Daytin | ne Telephone Number | |
| Enclosed is a check for | the following amount: | | | |
| □ \$25.00 Filing Fee | 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) | |
| MAI | LING ADDRESS: | STREET/COUR | IFR ADDRESS: | |

TO:

Registration Section

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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | Jeudy Express | | | |
|--|---|--|-----------------------------|---------------------|
| (Name of the Limited | Liability Company V Florida Limited Liab | as it now appears on ility Company) | our records.) | |
| The Articles of Organization for this Limited Liab | bility Company we | ere filed on | 01/24/21 | and assigned |
| This amendment is submitted to amend the follow | ving: | | | |
| A. If amending name, enter the new name of t | he limited liabilit | y company here: | | |
| The new name must be distinguishable and contain the wor | ds "Limited Liability | Company," the design | ation "LLC" or the abb | reviation "L.L.C." |
| Enter new principal offices address, if applicab | ole: _ | 1301 sw 10th a | ive apt B 102 De | Iray Beach fl 33444 |
| Principal office address MUST BE A STREET | ADDRESS) | | | ···· |
| Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BO | <u>OX)</u> | 1301 sw 10th a | ave apt B 102 De | Iray Beach fl 33444 |
| B. If amending the registered agent and/or registered agent and/or the new registered office | | e address on ou | r records, <u>enter t</u> l | he name of the new |
| Name of New Registered Agent: | Joseph Jeu | dy | | |
| New Registered Office Address: | 1301 sw 10th | ave apt B 102 | | |
| | | Enter Florida si | | |
| | Delray (| Beach | , Florida3 | 3444 |

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address 1301 sw 10th ave apt B 102 | Type of Action |
|--------------|--------------|------------------------------------|----------------|
| _Mgr | Joseph Jeudy | Delray Beach fl 33444 | 🖪 Add |
| | | | ☐ Remove |
| | | | ☐ Change |
| | | | Add |
| | | | □ Remove |
| | | | Change |
| | | | □ Adđ |
| | | | □ Remove |
| | | | Change |
| | | | |
| | | | ☐ Remove |
| | | | ☐ Change |
| | | | Add |
| | | | □ Remove |
| | | | ☐ Change |
| | | | D Add |
| | | | Remove |
| | | | □ Change |

| | | ···· | | | |
|-------------------|---|----------------------------|--|--|--|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | · · |
| | | | | | |
| | 1411 | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | |
| | | | | | |
| | | | | | |
| | | | · · · · · · · · · · · · · · · · · · | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | · | | | | |
| <u>ote:</u> If th | date, if other than the date we date is listed, the date must be sphe date inserted in this block does effective date on the Department | ses not meet the applica | o date of filing or r ble statutory filin | (option nore than 90 days after fi ng requirements, this d | i al) ling.) Pursuant to 605.020 date will not be listed as |
| | d specifies a delayed effe th day after the record is | | an effective | time, at 12:01 a.ı | m. on the earlier o |
| ted | November 2 | . 2021 | M | the | |
| | Signa | ture of a member or author | rized representative | of a member | |
| | - | | ph Jeudy | | |

Page 3 of 3

Filing Fee: \$25.00