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To:

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Fax Number : (850)617-6383

From:

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Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone

: (307)200-2803

Fax Number

: (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email .	Address:						
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ARMSTEAD'S EXPRESS DELIVERY LLC

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

ARMSTEAD'S EXPRESS DELIVERY LLC

(Name of the Limit	(A Florida Limited Liability Company)	
The Articles of Organization for this Limited Li Florida document number L21000122957	iability Company were filed on <u>(</u>	03/15/2021 and assig	ned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	f the limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L	.
Enter new principal offices address, if applic	able:		2021
(Principal office address MUST BE A STREE	T ADDRESS)	. 4	<u>**</u>
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Enter new mailing address, if applicable:		<u> </u>	$\frac{ \ddot{o} }{1-\ddot{c}}$ (
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		(Q)
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	Mice address here: Registered Agents I		
	7901 4th St N STE 3		
New Registered Office Address:	Enter Florida street address		
	St. Petersburg	, Florida 33702	<u> </u>
	City	Zip Code	
New Registered Agent's Signature, if changing			, .
I hereby accept the appointment as registered provisions of all statutes relative to the propaccept the obligations of my position as registered prize filed to merely reflect a change in the company has been notified in writing of this	er and complete performance istered agent as provided for it registered office address, I he	of my duties, and I am familiar with a Chapter 605, F.S. Or, if this docw	i and ment is
	Bel Have		
	If Changing Registered	Agent, Signature of New Registered Agent	:

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MGR = Manager AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
AMBR	Juvar Armstead	154 Glades Circle	☑ Add	
		Largo, Florida 33771	□ Remove	
			Change	
			□ Remove	
			Change	
			Add APR	
			Change 3	
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, 11 aiii	nding any other information, enter change(s) here: (Attach additional sheets, if		_
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(If an e Note docu	ve date, if other than the date of filing: ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day. If the date inserted in this block does not meet the applicable statutory filing requirement ent's effective date on the Department of State's records. Ord specifies a delayed effective date, but not an effective time, at 12 90th day after the record is filed.	ts, this date will not be 11.	sied as me
Date	04/14 2021		
	Signature of a member or authorized representative of a member		
	Riley Park		
1	Typed or printed name of signee		

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