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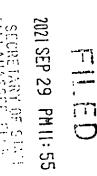
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COVER LETTER

Division of Corporations	•
SUBJECT: Trup 3's express LL Name of L	С.
Name of L	imited Liability Company
Dear Sir or Madam: Amenament The enclosed Basic Amenament	
The enclosed Registers Agent Poglows 4 10 Ch.	and fee(s) are submitted for filing.
Please return all correspondence concerning this matte	er to the following:
Journs Smith Name of Person	
Name of Ferson	
Firm/Company	
1858 NW 126th Address	
Pembroke Pines FL, 33028 City/State and Zip Code	
Trip3sexpresso amoil.com E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, please	call:
Sorris Smith at (407) 799 - 9813 Area Code & Daytime Telephone Number
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amoun	nt:
₩ \$25 Filling Fee	☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

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

FILED

Town 2's	ernass 111	•	2021 SEP 29 PM 11:56
(Name of the Limit	express LLC ed Liability Company as it now (A Florida Limited Liability Con	appears on our records.)	SECRETARY OF SEA F
The Articles of Organization for this Limited Li Florida document number	ability Company were filed	on 3/19/21	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liability comp	any here:	
The new name must be distinguishable and contain the w	ords "Limited Liability Company	y," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)		
B. If amending the registered agent and/or reagent and/or the new registered office addres	s here:		
Name of New Registered Agent:	Jorris	Smith	
New Registered Office Address:	Jorris 1958 NW 121 Dembroke pine	6 th Ave tter Florida street address	
	Pembroke Pine	<u>S</u> , Florid	(a 33023
New Registered Agent's Signature, if changing R			z.yz c.izus

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Juanita osceola-smith	6511 Sames E Billie drive	□Add
		Hollywood, FL, 33024	Le Remove
			□Change
MBR	Jocl Costellanos	13 ANN LEE Lane	□Add
		Tamarac, FL, 33319	Remove
			□Change
			□ Add
			□ Remove
			Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			
			□Remove
			□Change

(If an el Note:	tive date, if other than the date of filing:
ord is f	
Dated	9/27 21 New Survey Signature of a member or authorized representative of a member
	Jew Juik
	Signature of a member or authorized representative of a member

 $(e_{i,j}, e_{i,j}, e_{i,j},$

Filing Fee: \$25.00