LZI 000 168203

(Requestor's Name) (Address) (Address)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dadiness Emity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





400365901944

05/17/21--01082--028 **25.00

0/20/21

COVER LETTER

TO:

Registration Section

Division o	f Corporations					
FIFE	EXPRESS DISPATCH LLC					
SUBJECT:	Name of I	imited Liability Company	····			
The enclosed Articl	es of Amendment and fee(s) are s	ubmitted for filing.				
Please return all cor	respondence concerning this matt	er to the following:				
	KEITEL FIFE					
		Name of Person				
	FIFE EXPRESS DISPA	TCHTLC				
		Firm/Company				
•	14311 SW 268 ST APT	108				
		Address				
	HOMESTEAD FL 3303	32				
		City/State and Zip Code				
	KEITELFIFE@YAHOO	.COM (to be used for future annual report n				
For further informat	tion concerning this matter, please		orangation)			
	· · · · · · · · · · · · · · · · · · ·					
KEITEL FIFE Name of Person		at ()				
, > ,	aine of reison	wea Code Dayt	tme Telephone Number			
Enclosed is a check	for the following amount:					
■ \$25.00 Filing F	ce S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filling Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)			
<u>Mailing Ac</u> Registrat	<u>fdress:</u> ion Section	Street Address:				
	of Corporations	Registration S Division of C				
P.O. Box	6327		Division of Corporations The Centre of Tallahassee			
Tallahass	ee, FL 32314	2415 N. Moni	roe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

FIFE EXPRESS DISPATCH LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 04/12/2021 and assigned Florida document number | L21000168203 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter blorida street address City 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.

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>	<u>Address</u>	Type of Action
MGR	KEITEL FIFE	14311 SW 268 ST APT 108 HOMESTEAD FL 330	·
			□Remove
			□Change
			□Add
			©Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 🗆 Add
			□Remove
			□Change
			DAdd
			□Remove
			_ Change
			ERemove
			□Change

						
		·			<u>_</u>	
				·	<u></u>	·
		,		 -		 .
		<u> </u>				
		·				
		_		· · · · · · · · · · · · · · · · · · ·	. :	
		 		.		
				-		
						
				<u>-</u>		
						
			_			
ective date, if other to reffective date is listed, the te: If the date inserted nument's effective date	e date must be specif in this block does	ic and cannot be pr not meet the app	dicable statutory t	or more than 90 day	(optional) s after filing.) Pursuc ts, this date will no	int to 605.0201 of be listed as
	, ,		****			3
cord specifies a delayed	Leffective date, bu	it not an effective	o time, at 12:01 a.	m, on the earlier	of the The 90th.	Jav áftærtké
s filed				The control	var. (var. The avert	cary arter the
		3031				المدر
		2021	·			١.
ed						
ed MAY 31H		1/11				?:

. . .

Filing Fee: \$25.00