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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

MO DELIV		•	
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
	Modesio Talavera		
		Name of Person	·
	MO DELIVERS LLC		
		Firm/Company	
	3839 White Ibis Rd.		
		Address	
	Lakeland Florida 33811		
		City/State and Zip Code	
	motindahouse@gmail.com E-mail address: (t	to be used for future annual report notif	ication)
For further information c	oncerning this matter, please ca	all:	
Modesto Talavera		863 370-7449	
Name of Person		Area Code Daytime	e Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fcc	☐ \$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)
Mailing Address:		Street Address: Registration Sec	ction
Registration Section Division of Corporations		Division of Con	
P.O. Box 6327		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MO DELIVERS 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 and assigned Florida document number 1.21000218125 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 "L.L.C." 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 Florida street address

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

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	Modesto Talavera	3839 White Ibis Rd, Lakeland Fl. 33811	🗆 Add
			=Remove
			□Change
OWNER	Modesto Talavera	3839 White Ibis Rd. Lakeland Fl. 33811	∃ Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			🗀 Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change

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Effective	e date, if other than the date of filing:(optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (
Note: If	the date inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed as t
documen	nt's effective date on the Department of State's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ord is filed	1.
	May 31, 2021
Dated	
	m 1+ of
	Signature of a member or authorized representative of a member
	organize of a manage of authorizon representative of a memor
	Modesto Talaverz
	Typed or printed name of signee