LZ1000257806

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Special instructions to Filing Officer.	
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COVER LETTER

TO:	Registration Section
	Division of Corporations

H & H EXPRESS COURIER LLC

SUBJECT: _

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

HECTOR L RIOS

Name of Person

H & H EXPRESS COURRIER LLC

Firm/Company

60 E 3RD #508

Address

HIALEAH FL 33010

City/State and Zip Code

hectorrios4148@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

🔳 \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tałlahassec, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp (A Florida Limited	iany as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000257806</u> .	y were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited lial</u>	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Enter new principal offices address, if applicable: <u>(Principal office address MUST BE A STREET ADDRESS)</u> Enter new mailing address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		

		~ ?
Name of New Registered Agent:		
New Registered Office Address:		۰ ۰
	Enter Florida street address	
	, Florida	
	City	Zip Code 🖓

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	HECTOR L RIOS	60 E RD ST #508	🗆 Add
		HIALEAH FL 33010	🗆 Remove
			🖬 Change
AMBR	HENRY RIOS	60 E RD ST #508	🗆 Add
		HIALEAH FL 33010	[]Remove
			🗆 Add
			🗆 Remove
			Change
			🗆 Add
			🗆 Remove
			🗆 Change
			🗆 Add
			🗆 Remove
			□ Change
			🗆 Add
			🗆 Remove
			□ Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record 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 record is filed.

JUNE 21	2021	
	HAIL	
	Signature of a member or authorized representative of a member	
HECTOR L RIO)S	