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## **COVER LETTER**

Registration Section

**Division of Corporations** 

TO:

SAFEMOC SUBJECT:	ON XPRESS TRUCKING LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing,	
Please return all correspo	ondence concerning this matter	to the following:	
	GERMAIN, BOUZY		
		Name of Person	
· •	SAFEMOON XPRESS TI	RUCKING LLC	
		Firm/Company	
	8200 SW 22ND STREET,	APT 203	
		Address	
	NORTH LAUDERDALE.	F133068	
		City/State and Zip Code	
	BOUZY0608@GMAIL.CO	·	
	E-mail address: (	to be used for future annual report notifi	cation)
For further information of	concerning this matter, please c	all:	
GERMAIN, BOUZY		754 214-4628 at ()	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he following amount:		©
\$25.00 Filing Fee	☐ \$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 Registration 1 Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe	tion Sorations
,		Tallahassee, FL	32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## SAFEMOON XPRESS TRUCKING 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 v	vere filed on JULY 01, 2021	and assigned
Florida document number 1.21000302933		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		<u>.                                    </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		1.888-77.7
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ldress on our records, enter the nam	e of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
<del> </del>	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	Cuy	N)
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties, and I am for covided for in Chapter 605, F.S. Or,	amiliar with and if this document is
If Change	ing Degistered Agent Signature of New Deg	istand Agant

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
AMBR	GERMAIN, BOUZY	8200 SW 22ND STREET, APT 203	■Add
		NORTH LAUDERDALE, FL-33068	□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
	<del></del>		□Add
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fective	date, if other than the date of filing: (optional)	· - ;
n effecti ite: - If	ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing he date inserted in this block does not meet the applicable statutory filing requirements, this date	.) Pursuant to 605.02
	's effective date on the Department of State's records.	notes of topic we.
		,
	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The	ne 90th day after th
is filed.		
ted		
	Signature of a member authorized representative of a member	