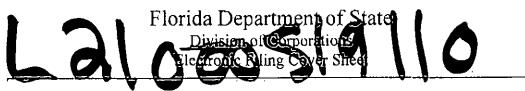
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Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Corporate Filing Menu

Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M CONNELLY YOUR EXPEDITOR LLC	•	
(Name of the Limited Linbit (A Florid	lity Company as it now appears on our reco da Limited Liability Company)	rda.)
The Articles of Organization for this Limited Liability (Florida document number L21000519110	Company were filed on 12/08/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
Marguerite Connelly Your Expediter LLC		
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	PRESS)	7/21
		7: 2
Enter new mailing address, if applicable:		(6°)
(Mailing address MAY BE A POST OFFICE BOX)		
		. o
B. If amending the registered agent and/or register		er the name of the new registered
agent and/or the new registered office address here	•	
N CN Projected Assets		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ada	frace
	Emer y an and sives but	7
	Clry	Florida
New Registered Agent's Signature, If changing Register	·	-1
		foother garage to camply with the
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this change	complete performance of my duties, agent as provided for in Chapter 60 red office address, I hereby confirm	and I am familiar with and 5, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

(((H21000468593 3)))

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				
· ·	MGR =	Manager		
		•		

Title	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
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Signature of a member or authorized representative of a member		578VEN WE955						
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Filing Fee: \$25.00