## L21000522633

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO:	Registration Se Division of Cor			
	D&I DELIV	ERY SERVICE LLC		
SUBJ	ECT:			
		Name of Lim	ited Liability Company	
The en	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		DENNYS RODRIGUEZ		
			Name of Person	
		D&I DELIVERY SERVIC	ELLC	
		•	Firm/Company	<del></del>
		4403 WARM SPRINGS W	AY	
		·	Address	
		MIDDLEBURG, FL 3206	8	
		DENNYS.RODRIGUEZ84	City/State and Zip Code @YAHOO.COM	<del></del>
		E-mail address: (	to be used for future annual report notif	ication)
For fur	ther information co	oncerning this matter, please ca	all:	
	DENNYS RODR	IGUEZ	904 9475801	
			at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	e following amount:		
<b>\$3</b> \$2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

**D&I DELIVERY SERVICE LLC** 

2022 JUN 23 PM 3: 04

Zip Code

(Name of the Limited	Liability Company as it now appe	ars on our records.), Terra	·
(A	Liability Company as it now appe A Florida Limited Liability Company	TALLAH	SSEE EL
The Articles of Organization for this Limited Lial Florida document number	bility Company were filed on _		
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the	designation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applical	ole:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:	<u></u>		
(Mailing address MAY BE A POST OFFICE B	<u></u>		
			-
B. If amending the registered agent and/or reg	istered office address on our	records, enter the name	of the new registere
agent and/or the new registered office address	nere:		
Name of New Registered Agent:			
New Registered Office Address:	Finter F	orida street address	
	Liue, I i	CA 1000 31/ 001 (4(4(4/ 033	
		Florida	

## 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 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>	Address	Type of Action
MGR	IHOSBANY ORTIZ	4403 WARM SPRINGS WAY	
		MIDDLEBURG, FL 32068	
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			□Change
			□Add
			□ Remove
			☐ Change
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ective date, if other than the	date of filing:	(optional)	
effective date is listed, the date muster: If the date inserted in this bloom	be specific and cannot be prior to date of filing o ock does not meet the applicable statutory fi	or more than 90 days after filing.) I	oursuant to 605.0207
cument's effective date on the De	partment of State's records.		
cord specifies a delayed effective	e date, but not an effective time, at 12:01 a.r	m. on the earlier of: (b) The	90th day after the
s filed.		, ,	•
	2022		
JUNE 21			
ted		ive of a member	