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T. MATTHEWS MAR 14 2022

COVER LETTER

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SUBJEC	-1: <u> </u>	Name of Lim	ited Liability Company			
The encl	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspon	ndence concerning this matter	to the following:			
		GREISY SUAREZ				
	Division of Corporations L & L EXPRESS SYC LLC Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. se return all correspondence concerning this matter to the following: GREISY SUAREZ Name of Person DIRECT SOLUTION SERVICES Firm/Company 1248 Viscaya Pkwy Address Cape Coral. Fl. 33990 City/State and Zip Code info@directsolutionservices.com E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: EISY SUAREZ Name of Person Area Code Daytime Telephone Number osed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy Cortified Copy Certified Copy C					
		DIRECT SOLUTION SER	RVICES			
	Division of Corporations L & L EXPRESS SYC LLC Name of Limited Liability Company closed Articles of Amendment and fee(s) are submitted for filing. return all correspondence concerning this matter to the following: GREISY SUAREZ Name of Person DIRECT SOLUTION SERVICES Firm/Company 1248 Viscaya Pkwy Address Cape Coral, Fl. 33990 City/State and Zip Code info@directsolutionservices.com E-mail address: (to be used for future annual report notification) ther information concerning this matter, please call: SY SUAREZ Name of Person Area Code Daytime Telephone Number ed is a check for the following amount:					
		1248 Viscaya Pkwy				
		· · · · · · · · · · · · · · · · · · ·	Address			
		Cape Coral, FL 33990				
		-				
For furth	er information co			neation)		
GREISY	SUAREZ		/			
	Name of	Person	Area Code Daytim	e Telephone Number		
Enclosed	l is a check for th	e following amount:				
□ \$2 5.	00 Filing Fee		Certified Copy	Certificate of Status &		

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, 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 Limitity Company us it now appears on our records)

L & L EXPRESS SVC LLC

22世第一3 PM 3: 15

A THE PARTY OF TARREST	(A Florida Limited Lia	ability Company)	Treemas.,
The Articles of Organization for this Limited Li Florida document number <u>L22000050707</u>	ability Company w	ere filed on 01/28/20	and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liabili	tv company here:	
The new name must be distinguishable and contain the w	ords "Limited Liability	y Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applications	able:	840 HOOSIER ST EA	ST
(Principal office address MUST BE A STREE	<u>TADDRESS)</u>	LEHIGH ACRES , FL	33974
Enter new mailing address, if applicable:		840 HOOSIER ST EA	ST
(Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	LEHIGH ACRES . FL	33974
B. If amending the registered agent and/or ragent and/or the new registered office address		dress on our records	s, enter the name of the new registered
Name of New Registered Agent:	GUERRA VELE	Z, SANDY B	
New Registered Office Address:	840 HOOSIER S	T EAST	
		Enter Florida stre	et address
	LEHIGH ACRES	S	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 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
AMBR	GUERRA VELEZ, SANDY B	840 HOOSIER ST EAST	
		LEHIGH ACRES, FL 33974	□Remove
			≡ Change
			🔲 Add
			□Remove
			□Change
			□ Add
			□Remove
			□Add
			□Remove
			□ Change
			□Add
			Remove
			□ Change
			□Remove
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fame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ree .	
<u>vote:</u>	ive date, if other than the date of filing:
recoi 1 is fi	d 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 led.
ated	FEBRUARY 25
	Signature of a nymber of authorized representative of a member
	GUERRA VELEZ, SANDY B
	Typed or printed name of signee

Filing Fee: \$25.00