

K22000056510

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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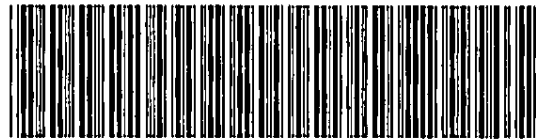
(Business Entity Name)

(Document Number)

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FEB 18 PM 5:07  
ST. LOUIS, MO  
FEB 18 2022

D. BRUCE  
FEB 28 2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LTT Express Courier, LLC  
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:

Latrice Coney  
Name of Person

LTT Express Courier, LLC.  
Firm/Company

15262 SW 281st Unit 701  
Address

Homestead, FL 33033  
City/State and Zip Code

Coney Latrice@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Latrice Coney at (786) 231-7310  
Name of Person Area Code Daytime Telephone Number

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)    ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**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

FILED  
2022 FEB 18 PM 5:57  
TALLAHASSEE, FL  
SECRETARY OF STATE

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

LTT Express Courier 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 were filed on 02/02/2022 and assigned Florida document number L22000056510

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

15262 SW 281<sup>st</sup> Unit 701  
Homestead, FL 33033

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

15262 SW 281<sup>st</sup> Unit 701  
Homestead, FL 33033

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

N/A  
*Enter Florida street address*

City

Florida

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>	<u>Type of Action</u>
AMBR	Latrice D Coney	1352 RainTree Bend Apt 205 Clermont, FL 34714	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
AMBR	Latrice D Coney	15262 SW 281ST unit 701 Homestead, FL 33033	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED  
MAR 13 2005  
CLERK OF DISTRICT COURT  
CLERK OF DISTRICT COURT  
CLERK OF DISTRICT COURT

7/13/2013 11:58 AM

REC'D  
FBI  
SEP 13 PM 5:57  
FBI  
SEP 13 PM 5:57

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

2/14/2022

Signature of a member or authorized representative of a member

Latrice Conely  
Typed or printed name of signer

**Filing Fee: \$25.00**