

h22000067679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

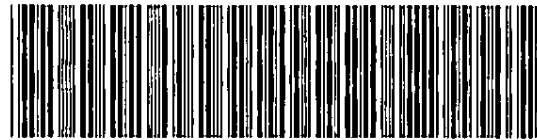
(Business Entity Name)

(Document Number)

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S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Choice Express Trucking and Delivery 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:

Glenroy A Hoilett
Name of Person

Choice Express Pickup and Delivery
Firm/Company

11924 W. Forest Hill Blvd, Ste 10A #219
Address

Wellington, FL 33414
City/State and Zip Code

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

For further information concerning this matter, please call:

Glenroy Hoilett at (561) 572-5677
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

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

Choice Express Trucking and Delivery 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 February 9, 2022 and assigned
Florida document number L22000067679.

This amendment is submitted to amend the following:

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

Choice Express Pickup and Delivery LLC

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)

11924 W. Forest Hill Blvd
Ste 10A #219
Wellington, FL 33414

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same as above

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:

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>
MGR	Glenroy J. Hoilett	11924 W. Forest Hill Blvd.	<input type="checkbox"/> Add
		STE 10A #219	<input checked="" type="checkbox"/> Remove
		Wellington, FL 33414	<input type="checkbox"/> Change
MGR	Josh D. Hoilett	11924 W. Forest Hill Blvd	<input type="checkbox"/> Add
		Ste 10A #219	<input checked="" type="checkbox"/> Remove
		Wellington, FL 33414	<input type="checkbox"/> Change
MGR	Jahwany A. Hoilett	11924 W. Forest Hill Blvd	<input type="checkbox"/> Add
		STE 10A #219	<input checked="" type="checkbox"/> Remove
		Wellington FL 33414	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

☐ Add

☐ Remove

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

Effective date, if other than the date of filing: _____ (Optional)
(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) this date will not be listed as the effective date of the filing requirements.

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.

Dated May 30, 2022

Signature of a member or authorized representative of a member

Glenroy A. Hoilett
Typed or printed name of signer

PALEON
2022 JUL 11 PM 5:22
ALLAHUSSEIN, FLORIDA

Filing Fee: \$25.00