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2022 HAY 27 PM 10: 01

COVER LETTER

TO:

Registration Section

Division of Corpo	orations				
SUBJECT.	WYC FACT	ORY EXPRESS LLC			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.			
Please return all correspond	dence concerning this matter	to the following:			
	WILMER LOPEZ				
		Name of Person			
	WYC FACTORY EXPRE	SS LLC			
	Firm/Company				
	1608 W 72ND ST				
	Address				
	1608 W 72ND ST				
	Address				
	WYCFACTORY@GMAI				
For further information cor	e-mail address: (neerning this matter, please c	to be used for future annual report notifi	cation)		
WILMER LOPEZ	, , , , , , , , , , , , , , , , , ,	305 741-9021 at ()			
Name of F	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)		
<u>Mailing Address:</u> Registration Se	ection	Street Address: Registration Sect	tion		
Division of Co		Division of Corp	orations		
P.O. Box 6327 Tallahassee FI	27214	The Centre of Ta	illahassee Street Suite 810		

Tallahassee, FL 32303

ARTICLES, OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAY 27 PM 10: 01 WYC FACTORY EXPRESS LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) TALLAHASSEE, FL 04/01/2022 The Articles of Organization for this Limited Liability Company were filed on ___ and assigned L22000159216 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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) Enter new mailing address, if applicable: (Mailing address M<u>AY BE A POST OFFICE BOX)</u> 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 _, Florida ___ City 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>	Address	Type of Action
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