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(Requestor's Name)	
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## **COVER LETTER**

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	Registra Division						
SUBJEC	Mark.	POMMER EXPRESS LLC					
SODARC	-li <u></u>			ited Liability Company			
The encl	osed Arti	cles of A	mendment and fee(s) are sub	mitted for filing.			
Please re	turn all c	orrespon	dence concerning this matter	to the following:			
			LUCIMAR JACOB				
				Name of Person			
				Firm/Company			
			9419 GENNA TRACE TR	AIL			
				Address			
			JACKSONVILLE, FL 322	57			
				City/State and Zip Code	· <u></u>		
			lucimarjacob1968@gmail.c				
For furth	er inform	nation con	E-mail address: ( accrning this matter, please co	to be used for future annual report notiful:	fication)		
LUCIMA	AR JACC	DΒ		954 867-4129 at ()			
		Name of F	erson	Area Code Daytim	e Telephone Number		
Enclosed	l is a chec	ck for the	following amount:				
<b>= \$2</b> 5.6	00 Filing	Fee	S30.00 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 a		ation	Street Address:			
Registration Section Division of Corporations				Registration Section Division of Corporations			
	P.O. Bo	x 6327		The Centre of T	•		
	Tallaha.	ssee, FL	. 32314	2415 N. Monroe	e Street. Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAY 19 PM 3: 09

POMMER EXPRESS LLC

RESS LLC

(Name of the Limited Liability Company as it now appears on our records. FALLAHASSEE, FL

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company v	vere filed on 04/21/2022	and assigned	
Florida document number L22000190316			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:		
The new name must be distinguishable and contain the words "Limited Liabilit	y 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 MAY BE A POST OFFICE BOX)	<del> </del>		
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:  Name of New Registered Agent:	ldress on our records,	enter the name of the new registered	
New Registered Office Address:			
	Enter Florida street ældress		
		Florida Zip Code	
	Ciţ	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duty covided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added</u> or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	DAVID TEXEIRA	3009 EMERALD MEADOW LN	□Add
		CHARLOTTE, NC 28273	Remove
			☐ Change
AMBR	DAVID T. CIACCO	6317 REVOLUTIONARY TRL	≣Add
		CHARLOTTE, NC 28217	□Remove
			☐ Change
	<del></del>		□Add
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E. Effective	date, if other than the	date of filing:		(option	al)	
Note: If t	ive date is listed, the date mu the date inserted in this bl t's effective date on the D	ock does not meet the ap	plicable statutory filing	ore than 90 days after fil	ing.) Pursuant to 6	605,0207 (3 isted as the
If the record s record is filed.	pecifies a delayed effectiv	re date, but not an effectiv	re time, at 12:01 a.m. (	on the earlier of: (b)	The 90th day at	fter the
Mz	AY 14	2022	1			
Dated		- F - T - T	<del></del> :			
		wind W				
		Signature of/a member or a	uthorized representative	of a member		

Filing Fee: \$25.00

Typed or printed name of signee