122000230473

(Re	questor's Name)	
(Ad	dress)	
V		
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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JUL 1 5 2022 D CUSHING

COVER LETTER

TO: Registration Se Division of Cor		•	•	***	
321 Expres	s LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
	ondence concerning this matter				
	Jonathan Brown				
		Name of Person	_		
	321 Express LLC				
		Firm/Company	·		
	4111 Tree Ridge Ln NE		ro.	<u>~3</u>	
		Address		022 .	
	Palm Bay, FL 32905		; r; ; r; ;	15 אטע 2022	:- :-
		City/State and Zip Code		CT	•
	321expressllc@gmail.com	10.00		15-	•
For further information of	n-mail address: (concerning this matter, please c	to be used for future annual report notificall:	canon)	9: 26	*.
Jonathan Brown		321 252 \$889 at ()			
Name o	rf Person		Telephone Number		
Enclosed is a check for t	he 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 Sta Certified Copy (additional copy is ea	itus &	
<u>Mailing Addre</u> Registration		Street Address: Registration Sec	tion		
Division of C	Corporations	Division of Corp	orations		
P.O. Box 631 Tallahassee.		The Centre of Ta	illahassee Street, Suite 810		
i ananassee.	エレ フカン・マ	LTID IN MORNO	Juccu June 010		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



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:

	rida
New Registered Office Address: Enter Florida street address	<u> </u>
Name of New Registered Agent:	

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 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
AMBR	Tathia Michel	4111 Tree Ridge Ln NE Palm Bay, FL 32905	□Add
			Remove
		-	□Change
MGR	Jonathan Brown	4111 Tree Ridge Ln NE Palm Bay, FL 32905	= Add
			□Remove
			Change
			□ Adđ
			□Remove
			□Change
			🗆 Add
			□Remove
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			□Remove
			Change

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ffective date, if other than an effective date is listed, the date ote: If the date inserted in the ocument's effective date on the	e must be specific iis block does n	e and cannot be p not meet the app	rior to date of til blicable statuto	ing or more than	90 days after fil	ling.) Pursuant to	605.020 listed as
record specifies a delayed eff is filed.	ective date, but	not an effectiv	e time, at 12:0	1 a.m. on the e	arlier of: (b)	The 90th day a	ifter the
June 11		2022					
- Sans	etton Signature o	Brown	J15	and an Unit of State			-

Filing Fee: \$25.00