L22000432498

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





Incorporating Services, Ltd.

· 1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com



ORDER FORM

TO Florida Department of State FROM

Melissa Moreau

The Centre of Tallahassee

2415 North Monroe Street, Suite 810

Tallahassee, FL 32303

850.656.7953

corphelp@dos.myflorida.com

850-245-6051

REQUEST DATE, 4/19/2023

PRIORITY Regular Approval

OUR REF_# (Order ID#) 1141532

ORDER ENTITY

FLP DELIVERY SERVICES LLC.

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FLP DELIVERY SERVICES LLC (FL)

File the attached amendment

NOTES:

\$25.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Wednesday, April 19, 2023 Page 1 of 1

COVER LETTER

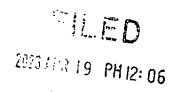
sion of Cor	porations		
	•		
	Name of Lim	ited Liability Company	
Articles of	Amendment and fee(s) are sub	mitted for filing.	
	LaTarsus,Porter A		
		Name of Person	
	FLP Delivery Services LL	С	
		Firm/Company	
	3702 W Spruce Street 139	5	
		Address	···-
	Tampa,Florida 33607		
		City/State and Zip Code	A
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	f Person	at () Area Code Daytim	e Telephone Number
T-Mille 0	110000		
check for th	ne following amount:		
iling 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)
		<u>Street Address:</u> Registration Se	ction
ision of C	orporations	Division of Cor	porations
	formation call correspondence of the corresp	Articles of Amendment and fee(s) are sub- all correspondence concerning this matter LaTarsus,Porter A FLP Delivery Services LL 3702 W Spruce Street 139 Tampa,Florida 33607 Latarsus.Portera@gmail.co E-mail address: (formation concerning this matter, please color, A Name of Person check for the following amount: iling Fee \$30.00 Filing Fee &	Articles of Amendment and fee(s) are submitted for filling. all correspondence concerning this matter to the following: LaTarsus,Porter A Name of Person FLP Delivery Services LLC Firm/Company 3702 W Spruce Street 1395 Address Tampa,Florida 33607 City/State and Zip Code Latarsus,Portera@gmail.com F-mail address: (to be used for future annual report not formation concerning this matter, please call: ter, A Name of Person Area Code S55.00 Filing Fee & Certified Copy (additional copy is enclosed) Ling Address: istration Section In Street Address: Registration Section ision of Corporations Street Address: Registration Section ision of Corporations

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



FLP Delivery Services 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 10/6/2022 and assigned
Florida document number L22000432498	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	lity company here:
FLP Services LLC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3702 W Spruce Street 1395
(Principal office address MUST BE A STREET ADDRESS)	Tampa.Fl 33607
Enter new mailing address, if applicable:	PO Box 4286
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a	Tampa,FL 33677 ddress on our records, enter the name of the new registered
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	ddress on our records, enter the name of the new registered
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	ddress on our records, enter the name of the new registered
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	ddress on our records, enter the name of the new registered

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
VP	Lonnie, Tingle, A JR.	3702 W Spruce Street 1335 Tampa,FL 33607	≣∧dd
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ument's effective date or	the Department of	State's records.		•	
	effective date, but no	t an effective tim	e, at 12:01 a.m. o	on the earlier of: ((b) The 90th day after the
s filed.		2023			
ecord specifies a delayed of s filed. April 18th		2023	··		
s filed.	www (J	2023 member or authori			