## L22000465586

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## **COVER LETTER**

TO:

**Registration Section** 

Tallahassee, FL 32314

Division of Corporations	•
SUBJECT: Flat Date Name of Limite	Ming And Delvery Stevices LCC d Liability gompany
The enclosed Articles of Amendment and fee(s) are submi	itted for filing.
Please return all correspondence concerning this matter to	the following:
Yavier	Name of Person
ITat Ra	te Mung And Delivery Strucker
27943 C	art Circle Address
	City/State and Zip Code
F-mail address (to b	e used for future annual report notification) mail. (CM
For further information concerning this matter, please call:	
Valler Le Perez	at (2-35) 785-9348 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 & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	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

Name of the Limited	Liability Company as Florida Limited Liabili	it now appears ty Company)		)	ices L	LC
The Articles of Organization for this Limited Liab	ility Company were	filed on(	10/25/202	2 <u>}}\\</u> :	and assigne	ed
L22000465586 This amendment is submitted to amend the follow	ing:					
A. If amending name, enter the new name of the	ne limited liability o	company her	<u>·e</u> :			
The new name must be distinguishable and contain the word	ls "Limited Liability Co	mpany," the dea	signation "LLC" c	or the abbrevia	tion "L.L.C.	17
Enter new principal offices address, if applicab	le:			ن : رئ الاستان	2673	
(Principal office address MUST BE A STREET	ADDRESS)				1,	
				1,-	<u> </u>	
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BO	<u></u>			<u> </u>	56	
B. If amending the registered agent and/or regi		ss on our rec	cords, <u>enter th</u>	e name of t	he new re	
Name of New Registered Agent:	Xavier	1-ce	Pere	3		
New Registered Office Address:		Enter Floria	a street address	<del></del>		<del></del>
-	C	ity	, Flori		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>	Address	Type of Action
mal.	Yavier lee Perez	27943 Cal Circle Bonite Spings F1-34435	\Add
			□Remove
			□Change
			□Add
		<del></del>	□Remove
			□ Change
			□Add
			□Remove
			□Change
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· ·	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
_		
_		
·FFa ative	e date, if other than the date of filing:(optional)	
an effect Note: If	tive 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listent's effective date on the Department of State's records.	6.0207 ed as 1
record s d is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after d.	r the
Pated	Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member  (Uillier Recognition of Signee)	