## L23000097565

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

	gistration Se vision of Cor				
emptezer.		FEE EXPRESS LLC			
SUBJECT:		Name of Lim	ted Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sub-	nitted for filing.		
		ondence concerning this matter			
		DENISSE ЛМЕNEZ			
			Name of Person		
		LA&C FINANCIAL CON	SULTING LLC		
			Firm/Company	<del></del>	
		2141 N COMMERCE PK	WY		
		Address			
		WESTON, FL, 33326			
			City/State and Zip Code		
		denisse_jimenez@libertyta:	com o be used for future annual report notif	(Carian)	
For further i	nformation c	oncerning this matter, please ca			
DENISSE J			305 4978663 10:0	00AM TO 4:00PM	
		f Person	at () Area Code Daytime	e Telephone Number	
Enclosed is	a check for th	ne following amount:			
□ \$25.00	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
	niling Addres		Street Address:		
	gistration S vision of C	Section Corporations	Registration Sec Division of Cor		
	O. Box 632		The Centre of T		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BEST COFFEE EXPRESS LLC		
(Name of the Lim	ited Liability Company as it now a (A Florida Limited Liability Comp	ppears on our records.) any)
The Articles of Organization for this Limited	Liability Company were filed o	n 02/23/2023 and assigned
Florida document number L23000097565	·	
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability compar	ny here:
THE COFFEE EXPRESS LLC		r->
The new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the abbreviation "LLaC3"
Enter new principal offices address, if appl	icable:	1-9
, ,		7.3
Principal office address MUST BE A STRE	<u> </u>	<del></del>
		<u></u>
		17.
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u></u>	
		<u> </u>
	_	
		our records, enter the name of the new regist
<u>igent and/or the new registered office addr</u>	ess here:	
Name of New Registered Agent:	LA&C FINANCIAL CONS	ULTING LLC
New Registered Office Address:	2141 N COMMERCE PKW	Y
new registered office Address.	Ente	r Florida street address
	WESTON	, Florida 33326
	City	Zip 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
		· 	□Add
			□Remove
			□Change
<u>-</u>			□Add
			□Remove
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			□Remove
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Note: If the date	f other than the date of filing:
	a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
l is filed.	
JUNE, 20	2024
10000	<u> </u>
ated	$\mathcal{U}$
Dated	Munt
Dated 10.NH. 20	Signature of a member or authorized representative of a member

Filing Fee: \$25.00