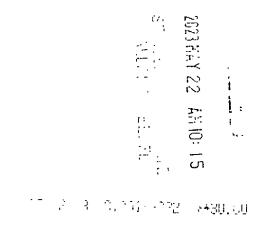
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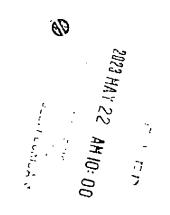
	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
	(Business Entity Name)	,
	(Document Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

SUBJECT: Most Wanted Drive	Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are Please return all correspondence concerning this ma		
Emily.	Pena Rodriguez Name of Person	
<u>Mostu</u>	Varied Drivor, L.C. Firm/Company	
10226 Cur	ry Ford Road, Suite 10	07, Box 57
orlando, i	City/State and Zip Code	
E-mail addre	ess: (to be used for future annual report notifi	ication)
For further information concerning this matter, plea-	se call:	2
Emil y. Pana hadrigue	at (407) 400 Area Code Daytime	Telephone Number 7
Enclosed is a check for the following amount:		1° ·
□ \$25.00 Filing Fee		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Canada Add	

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TO:

Registration Section

Division of Corporations

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

Most Wanted Driv (Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compar Florida document number <u>L2300185619</u> .	ny were filed on Liphe 14 ¹¹ , 2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	ability company here:
The new name must be distinguishable and contain the words "Limited Lia	bility 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)	10 226 Curry Ford Rd Suite 107, Box 57 Orlando, F1: 32825
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10 able Curry Ford Boads = 5uite 107, Box 57 = 57 orlando, Ft. 32825
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	UPOST, LLC.
New Registered Office Address: 10226	Curry Ford Rd Suite 107 Enter Florida street address
New Registered Agent's Signature, if changing Registered Agen	City., Florida 32825 Zip Code
New Registered Agent's Signature, it changing Registered Agen	<u>। </u>

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>	Name	Address	Type of Action
MBR	Cmil Y. Pena Rodriguez	10226 Gurry Ford Rd Suite 107 OHando, 32825	□Add
		UHando, 32825	□Remove
MGR	Gladyke Ramos Ortiz	10226 Curry Ford Rd Buite 107	□Add
			□ Remove
			2023-1-1-1 Add
			N □ Remove
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sativa data if oth	er than the date of	f filing:			(optional)	
effective date is listed	l, the date must be spec	ific and cannot b	e prior to date of f	filing or more than 90	days after filing.)	Pursuant to 605.026
	ted in this block does ate on the Departme			tory ming requirer	nents, this date v	viii noi de listed a
	ayed effective date, b	ut not an effec	tive time, at 12:	:01 a.m. on the ear	lier of: (b) The	90th day after th
s filed.						
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		(0)	a muth oni	esentative of a memb	,	
		re or a member o	or authorized repre	esemanye or a mem	CI	