L23000228274

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Coly Called April 1997)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer.
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COVER LETTER,

TO: Registration Se Division of Cor	ection porations		
OLUB ID COM	IVERY LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	MYRIAM A LILLO		
		Name of Person	
	MA TAX SERVICES LLC	3	
		Firm/Company	
	2257 SW 156TH LOOP		
		Address	
	OCALA, FL 34473		
		City/State and Zip Code	
	MYRIAM.LILLO@YAHC		
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report no all:	Offication)
MYRIAM A LILLO		352 512-1322	
	of Person	at () Area Code Dayt	ine Telenhane Number
, Name (n reisui	Area code 12450	me receptore realises
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 Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	Systian
Registration Section Division of Corporations		Registration S Division of C	
P.O. Box 632	27	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GIAN DELIVERY LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 05/09/2023	and assigned
Florida document number L23000228274		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
he 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:		
Principal office address MUST BE A STREET ADDRESS)		2073
		<u> </u>
		:) 1
		dn –
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Floric	ła
	Cin:	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 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	VICTORIA MARIE ESPINOZA	6820 FORREST ST HOLLYWOOD, FL 33024	= Add
			□Remove
			□Change
			🗆 Add
			□Remove
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Tective date, if other than the effective date is listed, the date meter. If the date inserted in this becoment's effective date on the I	block does not meet the app	meable statutory tiling re	(optional) than 90 days after filing. equirements, this date	Pursuant to 605.020 will not be listed a
ecord specifies a delayed effecti is filed.	ve date, but not an effectiv	e time, at 12:01 a.m. on t	he earlier of: (b) The	2 90th day after th
AUGUST 09,	2023			

Filing Fee: \$25.00