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SUGAR SANDS EXPRESS GROUP LLC	I
Please Debit FCA000000003 For: 25	
Thank you Seth Neeley	
St.	Art of Inc. File
	LTD Partnership File
•	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art, of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
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	Photo Copy
	Certificate of Good Standing
	Certificate of Status
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COVER LETTER

		stration Sect sion of Corpe				
SUBJEC		SUGAR SANDS EXPRESS GROUP LLC				
SOBSEC.			Name of Limi	ited Liability Company		
The enclo	sed	Articles of Ar	mendment and fee(s) are subn	mitted for filing.		
Please ret	urn :	all correspond	lence concerning this matter t	to the following:		
			EMILY HOLLY CURBOV	W		
				Name of Person		
			SUGAR SANDS EXPRES	S GROUP LLC		
			27-7-1-12	Firm/Company		
			11837 SW 32ND LAND			
				Address		
			GAINESVILLE, FL 32608	8		
				City/State and Zip Code		
			96gatorbait@gmail.com			
			E-mail address: (to	o be used for future annual report notification)		
For furthe	r inf	ormation con	cerning this matter, please cal	II:		
Martha M	lcKe	nna, Office N	fanager	770 940-2317		
at ()						
Enclosed i	sac	heck for the f	following amount:			
■ \$2 5.06	0 Fil	ing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ Certified Copy (additional copy is enc		

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

SUGAR SANDS EXPRESS GROUP LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 4/17/24 The Articles of Organization for this Limited Liability Company were filed on ____ and assigned Florida document number 124000175515 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida City

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
MGR	KIMBERLY BOBB	90 SW 3RD ST	■Add
		UNIT 3804	
		MIAMI, FL 33130	□ Change
			□ Add
			□Remove
			Change
 ,			
		4-4-4-4-4	□Change
			Remove
			□Change
			□Add
			□Remove
			Change
			□ Add
			□Remove

•	
lfaan e	tive date, if other than the date of filing: (optional) flective 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 605,0207
Note: docur	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
e reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Dated	
	Signature of a member or authorized representative of a member
	EMILY HOLLY CURBOW
	Typed or printed name of signee

COVER LETTER

	tion Section of Corporations	
SURTECT:	GAR SANDS EXPRESS GROU	PLLC
SUBJECT:	GAR SANDS EXPRESS GROU Name	of Limited Liability Company
The enclosed Artic	cles of Amendment and fee(s) a	re submitted for filing.
Please return all co	orrespondence concerning this n	natter to the following:
	EMILY HOLLY CE	JRBOW
		Name of Person
	SUGAR SANDS EX	PRESS GROUP LLC
		Firm/Company
	11837 SW 32ND LA	ND
		Address
	GAINESVILLE, FL	32608
		City/State and Zip Code
	96gatorbait@gmail.co	
For further informa	E-mail addi ation concerning this matter, ple	ress: (to be used for future annual report notification) ase call:
Martha McKenna, Office Manager		770 940-2317
Name of Person		at (
Enclosed is a check	c for the following amount:	
■ \$25.00 Filing F	Fee S30.00 Filing Fee & Certificate of State	
Mailing Address: Registration Section		Street Address: Registration Section
Division of Corporations		Division of Corporations
P.O. Box Tallahass		The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303