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Division of Corporations

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Phone

: (323)962-8600

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EXPEDITED MANAGEMENT SOLUTIONS L.L.C.

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K. SALY DEC 19 2024 Registration Section

TO:

## **COVER LETTER**

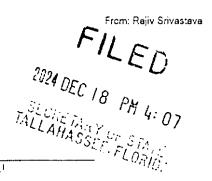
Div	ision of Cor	porations		
SUBJECT:		ED MANAGEMENT SOLUTI	ONS L.L.C.	
		Name of Lim	ated Liability Company	
The enclosed	l Articles of	Amendment and feets) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Mike Town		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm Company	<del></del>
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			Address	
		Austin, TX 78717		
		-	City/State and Zip Code	
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Mike Town			800 773-0888 at ( )	
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MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



EXPEDITED MANAGEMENT SOLUTIONS L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{05/10/2024}{2}$ and assigned Florida document number 1.24000219614 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 "Emitted Liability Company," the designation "LLC" or the abbreviation "L.L.C." 5379 Lyons Rd. #903 Enter new principal offices address, if applicable: Coconut Creek, FL 33073 (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

## 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
AMBR	Shaena Precious Thomas		□ Add
		1433 SW 24th Ct Apt 3 FORT LAUDERDALE, FL 33315	■ Remove
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