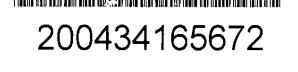
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(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	2 #1
(Cil	.y/State/Zip/Pfione	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRET LED REUS

COVER LETTER

TO: Registration Se Division of Cor			4 ·
	OURIER & CARGO EXPRESS	LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ALVARO ORTEGA		
<u> </u>		Name of Person	
	NEWNITY TAXES & SO	LUTIONS	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	1000 S MILITARY TRAIL	C, STE C	
		Address	
	WEST PALM BEACH, FI	. 33415	
	······································	City/State and Zip Code	
	CLIENTS@NEWNITY.CO		- x =
For further information of	H-mail address: (concerning this matter, please or	to be used for future annual report notificat	SECTION SECTION
ALVARO ORTEGA		561 275-4636	ک مد _{یر} مدیر د د د
Name o	f Person	at ()Area Code Daytime Te	lephone Number
Enclosed is a check for the	he following amount:		- ' <u>:</u>
☐ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		<u>Street Address:</u> Registration Sectio	ın

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

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SB & I COURIER & CARGO EXPRESS		ne manuda)
(A Flori	fility Company as it now appears on o idn Limited Liability Company)	ar recor us .)
The Articles of Organization for this Limited Liability	Company were filed on 06/14/20	and assigned
Florida document number L24000271075		
This amendment is submitted to amend the following:		
AIf amending name, enter the new name of the lin	mited liability company here:	~
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	DRESS)	
		5 75
Enter new mailing address, if applicable:		2024 N 5-609 1/A
(Mailing address MAY BE A POST OFFICE BOX)		
		·, -i
B. If amending the registered agent and/or register	red office address on our record	e enter the name of the new register.
agent and/or the new registered office address here		S, enter the name of the new registers
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	eet address
	City	, Florida Zip Code
	City	zip com

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	LLANOS CONDE, CAROLINA	156 NW 20TH ST	□Add
		BOCA RATON, FL 33431	■ Remove
			☐ Change
			□Remove
			Change
			□Add
			UAdd Remove
			☐Add ☐
			□Remove
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				90:41:44 30:41:44
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ective date, if other than a effective date is listed, the date: If the date inserted in the cument's effective date on	an the date of filing: ate must be specific and cannot be prior to de this block does not meet the applicable the Department of State's records.	ate of filing or more than 90 days statutory filing requirement	(optional) s after filing.) Pursuant to s, this date will not be	605,0207 (listed as t
cord specifies a delayed ei s filed.	ffective date, but not an effective time,	at 12:01 a.m. on the earlier	of: (b) The 90th day a	ifter the
June 28 ted	2024			
	Sano A	Honteya.		

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