

L24000418125

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

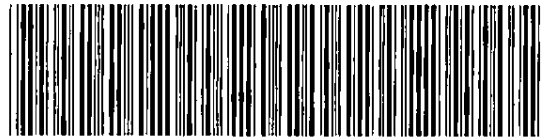
(Document Number)

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TALLAHASSEE FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TrailBlaze Express LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christina Foster

Name of Person

Firm/Company

2601 SW 64th AVE Unit 15

Address

Miramar, FL, 33023

City/State and Zip Code

trailblazeexpressllc@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christina Foster

954 544-1574

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|

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**

TrailBlaze Express LLC

(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 September 25th, 2024 and assigned
Florida document number L24000418125.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

N/A

N/A

City

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 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Christina Foster	8403 Pines Blvd	<input type="checkbox"/> Add
		Pembroke Pines, FL	<input type="checkbox"/> Remove
		33024	<input checked="" type="checkbox"/> Change
MGR	Alicia C. Adams	8403 Pines Blvd	<input type="checkbox"/> Add
		Pembroke Pines, FL	<input type="checkbox"/> Remove
		33024	<input checked="" type="checkbox"/> Change
AR	Otis R. Orgille	8403 Pines Blvd	<input type="checkbox"/> Add
		Pembroke Pines, FL	<input checked="" type="checkbox"/> Remove
		33024	<input type="checkbox"/> Change
AMBR	Micheal C. Orgille	8403 Pines Blvd	<input type="checkbox"/> Add
		Pembroke Pines, FL	<input checked="" type="checkbox"/> Remove
		33024	<input type="checkbox"/> Change
AMBR	Michelle M. Forbs	8403 Pines Blvd	<input type="checkbox"/> Add
		Pembroke Pines, FL	<input checked="" type="checkbox"/> Remove
		33024	<input type="checkbox"/> Change
AMBR	Cynthia C. Francis	8403 Pines Blvd	<input type="checkbox"/> Add
		Pembroke Pines, FL	<input checked="" type="checkbox"/> Remove
		33024	<input type="checkbox"/> Change

[illegible]

(If an effective 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 (3)(b)

If the record 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 record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00