11-20-2024

Florida Department of State Division of Corporations Electronic Esting Cover Street

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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H240003849883ABCD

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : L & R INTERNATIONAL FIRM INC

Account Number : I20200000026 Phone : (305)987-6865 Fax Number : (305)222-9004

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RELIABLE EXPEDITING LLC

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Corporate Filing Menu

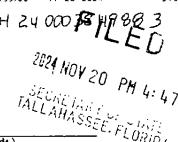
Help

TO:

COVER LETTER

TO:	Registration Sec Division of Corp			
cub fr/				
SUBJE	-1;	Name of Limi	ted Liability Company	
The encl	osed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please re	tum all correspor	idence concerning this matter	to the following:	
		MTLLO, EDRICK		
		 	Name of Person	· · · · · · · · · · · · · · · · · · ·
			Firm/Company	
		2842 SW 124CT		
		ELIABLE EXPEDITING LLC Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filting, Il correspondence concerning this matter to the following: MILLO, EDRICK Name of Person Firm/Company 2842 SW 124CT Address MIAMI, FL 33175 City/State and Zip Code E-mail address: (to be used for future annual report notification) Dermation concerning this matter, please call: ICK 786 Name of Person Area Code Daystime Telephone Number Leck for the following amount: ling Fee Certificate of Status Certified Copy (additional copy is enclosed) Registration Section Street Address: Registration Section Division of Corporations		
		MIAMI, FL 33175		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
For furt	ner information co	ncerning this matter, please co	all:	
MILLO	, EDRICK			
	Name of	Person	Area Code Daytime	e Telephone Number
Enclose	d is a check for th	c following amount:		
≅ \$ 25	.00 Filing Fee	-	Certified Copy	Certificate of Status & Certified Copy
	Division of C P.O. Box 632	fection orporations 7	Registration Sec Division of Cor The Centre of T 2415 N. Monro	porations 'allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



RELIABLE EXPEDITING 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 10-08-2024	and assigned
Florida document number L24000438932		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity 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 a	address on our records, e	nter the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:	<u> </u>	·
New Registered Office Address:	Enter Florida street a	.,,
	ddress	
	0:	, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	, L	

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

3052229004

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ANAYANCI ESPERON DIAZ	6354 SW 37 TH ST MIAMI FL 33155	≣Add
			□Remove
			□Change
			□Add
			□ Remave
			Change 20 P
			©Change
			□Remove
			Change
			□Add
			□Remove
			□ Change
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			Remove
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If amending	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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-		104 20 PM
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		6.1.
		<u>ب</u>
(If an effective Note: If the	ate, if other than the date of filing: 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 60s date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list effective date on the Department of State's records.	
ne record spe ord is filed.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
Dated	0/2024	
	EDRICK MILLO	
•	Signature of a member or authorized representative of a member	
]	EDRICK MILLO	

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Filing Fee: \$25.00