

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L1500057164

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To: Division of Corporations
 Fax Number : (850)617-6383

From: Account Name : THE ELITE CARRIER SERVICES OF MIAMI LLC
 Account Number : I20120000040
 Phone : (305)405-2600
 Fax Number : (305)405-2601

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

Email Address: _____

2022 JUL 20 AM 11:07

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 FRESH EXPRESS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2022 JUL 20 AM 11:46

ACCEPTED
 AND
 FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FRESH 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 06/19/2015 and assigned Florida document number L1500017164

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)

2022 JUL 20 AM 11:46

FILED

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

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	JOSE ANGEL CLEMENTE ALVA	5303 S W 202 AVEFORT LAUDERDALE, FL 33332	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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