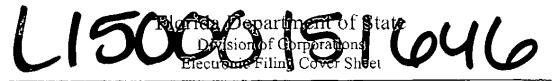
8/2/2017

Division of Corporations



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

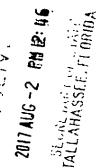
From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I20000000146
Phone : (305)444-4994
Fax Number : (305)444-4977

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

£mail	Address:	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EPIC EXPRESS SERVICE LLC



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Electronic Filing Menu

Corporate Filing Menu

J. HARRIS

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EPIC EXPRESS SERV		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our fability Company)	records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L15000151646</u>	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
		<b>28</b>   Salah   Talah
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation	"LLC" or the abbreviation "L.H.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		(S) 1   T
		Tir
Enter new mailing address, if applicable:	·£:	2 <b>x</b> 15
(Mailing address MAY BE A POST OFFICE BOX)		52
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:  New Registered Office Address:	Enter Florida street	
	City	Ziç Code
New Registered Agent's Signature, if changing Registered Agent:		
The contract of the contract o	an divinis in this compate	. I finale an agree on any live mich the

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.

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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

Title	Name	<u>Address</u>	Type of Action
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		MIAMI, FL 33132	■ Rêmûvê
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