117000216741

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IVISION OF CORPORATIONS

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FORMULA EXPRESS LLC				
(Name of the Limit	ed Liability Compa (A Florida Limited)	ny as it now appea Liability Company)	rs on our records.)	
The Articles of Organization for this Limited L Florida document number L17000216741	iability Company	were filed on 10	0/19/2017 and a	assigned
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company h	ere:	
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the o	lesignation "LLC" or the abbreviation	1.L.C."
Enter new principal offices address, if applic	able:	9329 SHERIDA	AN STREET	
(Principal office address MUST BE A STREE	T ADDRESS)	STE 579		
		HOLLYWOOI	D, FL 33024	on m m a muunan suussan a mosama
Enter new mailing address, if applicable:		PO BOX 24502	24	
(Mailing address MAY BE A POST OFFICE	BOX)	BROOKLYN,	NY 11224	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/ registered agent and/or the new registered of			our records, enter the nam	e of the new
Name of New Registered Agent:	LEON BEKER	·		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	9329 SHERIDA	AN STREET, STE	579	
	****	Enter Flo	rida street address	
	HOLLYWOOD		Florida	
		City	Zıp Cod	le –

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, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	LEON BEKER	9329 SHERIDAN STREET	□ Add
		STE 579	□ Remove
		HOLLYWOOD, FL 33024	☐ Change
AMBR	KEISER BERATUNG LLC	PO BOX 245798	
		BROOKLYN, NY 11224	-
			Change
MGR	LEON BEKER	9329 SHERIDAN STREET	■ Add
		STE 579	□ Remove
		HOLLYWOOD, FL 33024	□ Change
MGR	LEONID CHERNOY	PO BOX 245798	
		BROOKLYN, NY 11224	Remove
			☐ Change
		·	□ Add
		***	Remove
			SECRET NVISION I
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			Change

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