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(((H23000380254 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PRIME CORPORATE FILING SERVICES LLC

Account Number : I20230000092 Phone : (786)356-1156 Fax Number : (305)564-6768

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

Email Address: __INFO@PRIMEFILING.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SERVIXPRESS CO. LLC

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

. From Prime Corporate	Filing 1.305.564.6768 Wed Nov	1 12:18:07 2023 MDT Page 2 of 4
(((H23000380254 3)))	ARTICLES OF AMEND	MENT

, TO

ARTICLES OF ORGANIZA OF	LION	
*	•	I
SERVIXPRESS CÖ. LLC		
(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company	urs on our records.)	
ne Articles of Organization for this Limited Liability Company were filed on _	03/01/2021	and assigned
is amendment is submitted to amend the following:		
, , , , , , , , , , , , , , , , , , ,	h a mili	
If amending name, enter the new name of the limited liability company	uere.	
e new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or the ab	breviation "L.L.C."
nter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADDRESS)		
nter new mailing address, if applicable:		
Agiling address MAY BE A POST OFFICE BOX;		
idding dddress PIAT BEATOST OFFICE BONG		
		5 .13
. If amending the registered agent and/or registered office address on our tent and/or the new registered office address here:	records, enter the nam	e of the new regi
Name of New Registered Agent:		
New Registered Office Address:		
Enter F.	larida street adāress	·-
<u> </u>	, Florida	Zip Cod e ∨
Cu).		Zip Code∑ <u>-</u> =-
ew Registered Agent's Signature, if changing Registered Agent:		

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

From Prime Corporate Filing 1.305.564.6768 Wed Nov 1 12:18:07 2023 MDT Page 3 of 4 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	Address	Type of Action
AMBR	Ronald Alfonso Ordonez	20 SE 3rd AVE	□Add
		MIAMI, FL 33131	⊠ Remove
			DChange
AMBR	Manuel Humberto Ordonez Villamil	20 SE 3rd AVE	⊠Ad∂
		MIAMI, FL 33131	□ Remove
			□Add
			©Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
**************************************	radiative statement designatives a specie at a 120 horospecial comment.		
			□Remove
			□ Change

amending any other informatio	n, enter change(s) hei	e: (Attach additie	mal sheets, if necesso	י, איני
				
		<u></u>	- ·	
		· - ·····		
	~			
				
Tective date, if other than the date neffective date is listed, the date must be stee: If the date inserted in this block cument's effective date on the Depa	specific and cannot be prior does not meet the applic	able statutory filing	(optiona ore than 90 days after filin requirements, this day	 Pursuant to 605.0
ecord specifies a delayed effective da is filed.	ate, but not an effective t	ime, at 12:01 a.m. c	n the earlier of: (b) 1	The 90th day after
ted NOVEMBER 1ST	. 2023	_	_	
ed NOVEMBER 151	. 2023	- '// //		

Typed or printed name of signee