## Florida Department of State Division of Corporations State Division of Corporations State Other Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INC AUTHORITY, LLC

Account Number : 120240000004 Phone : (775)329-7721

Fax Number : (775)376-9207

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

mail	Address:	Toniakabba@gmail.com	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

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S. RODERTS

Help MAR 2 7 2024

From Corporate Service Center Inc 1.702.507.9682 Tue Mar 26 11:53:01 2024 MDT Page 2 of 4

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	EXPRESS, LLC	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Company	were filed on 10/13/2023	and assigned
Florida document number L23000472970		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
ANGO EXPI The new name must be distinguishable and contain the words "I immed Liabi	RESS, LLC	
The new name must be distinguishable and contain the words "I imited Liabi	dity Company," the designation "LLC" or the abbi	eviation "L.L.C."
Enter new principal offices address, if applicable:	7754 Okeechobee Blvd #810	202
(Principal office address MUST BE A STREET ADDRESS)	7754 Okeechobee Blvd #810 West Palm Beach, FL 33411	HMR 2
		6
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		: in
		£
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		ne name of the new
Name of New Registered Agent:		
New Registered Office Address:	\$- bus 6 to 100	
	Enter Florida street address	
	, Florida	7:C1.
	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

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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>	Name	Address	Type of Action
<del></del>			Add
			Remove
			□ Change
			□ Add
			□ Remove
			□ Change
			D AdJ
			□ Remove
			☐ Change
			AdJ
			□ Remove
			<b> </b> Add
			☐ Remove
			Change
			☐ Remove
			□ Chuque

D. If amending any other information, enter change(s) here: (Attach additional sheets, if weessary.)

Please update business purpose to: Car Sales, Rentals & Delivery E. Effective date, if other than the date of filing:  $\frac{N/A}{}$ (if an effective date is listed, the date must be specific and cannot be prior to date of filling or more than 90 days after filling a Paramet to 605 fi207 (3 day Note: If the date inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed as the document's effective date on the Department of State's records If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. signature of a member or authorized representative of a member Anthony Kabba

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Typed or pointed name of signee

Filing Fee: \$25.00