## L15000 125661

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
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(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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THE ACTOR OF STATE

**S Warren JUL 2 7 2016** 

## **COVER LETTER**

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TO:	Registration Se Division of Cor				
CHIBLE	CT.	RIKBIEL	EXPRESS, LLC.		
SUBJE	CI:	Name of Lim	ited Liability Company	<u>.</u>	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please r	eturn all correspo	ndence concerning this matter	to the following:		
			JUAN DANIEL LOPEZ		
			Name of Person		
			RIKBIEL EXPRESS, LLC	<u>.</u>	
		<del></del>	Firm/Company		
		6441 S.	. CHICKASAW TRAIL SI	JITE 124	
			Address		
		0	RLANDO, FL. US 32829		
			City/State and Zip Code		
			IELEXPRESS@GMAIL.C		
		E-mail address: (	to be used for future annual re	eport notification)	
For furt	her information c	oncerning this matter, please ca	all:		
	JUAN DAN	VIEL LOPEZ	407 at ( )	900-0791	
	Name o	f Person	Area Code	Daytime Teleph	one Number
Enclose	d is a check for th	e following amount:			
□ \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RI	KBIEL EXPRESS, LLC.	
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab	oility Company were filed on	and assigned
his amendment is submitted to amend the follow	ring:	
If amending name, enter the new name of t	he limited liability company here:	18.19
	•	Charles Charles
ne new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
nter new principal offices address, if applicat	ole:	25 5884 0
Principal office address MUST BE A STREET	ADDRESS)	7 P
		DA G
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE B	<u></u>	
. If amending the registered agent and/or the new registered offi	registered office address on our records, <u>see address here</u> :	enter the name of the
Name of New Registered Agent:	JUAN DANIEL LOPEZ	
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da
	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 60f, 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>	Address	Type of Action
AMGR	JUAN DANIEL LOPEZ	6441 S. CHICKASAW TRAIL	<b>■</b> Add
		SUITE 124	☐ Remove
		ORLANDO, FL. 32829	☐ Change
AMGR	ROSLYN BURGOS	10081 COBALT BAY RD	□ Add
		ORLANDO, FL. 32827	<b>■</b> Remove
			Change
			□ Add
			Remove
			☐ Change
1700			□ Add
			☐ Remove
			Change
			Add
			☐ Remove
			Change SSRY O Add
			Remove
			Change

if other than the is listed, the date muse inserted in this bloctive date on the Docifies a delayed by after the reconstruction.	date of filing to be specific and ock does not n epartment of S d effective of ord is filed.	g: l cannot be prior to neet the applicabl state's records.	date of filing or ne statutory filing on the statutory filing on the statutory filing or ne	nore than 90 d ng requireme time, at 1	2:01 a.	late wil	l not be li	isted as th
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Filing Fee: \$25.00