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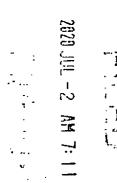
| (Requestor's Name)                      |
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| (Address)                               |
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| (City/State/Zip/Phone #)                |
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| PICK-UP WAIT MAIL                       |
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|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
| Octanica dopies                         |
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| Special Instructions to Filing Officer: |
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Office Use Only



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AUG 1 5 2020 S. YOUNG

## **COVER LETTER**

TO:

Registration Section Division of Corporations

|   | NO EXPRESS, LLC                              |  |  |
|---|--|--|--|
| SUBJECT:  | Name of Lim                                  | ited Liability Company   |  |
|   | Amendment and fee(s) are sub                 | _  |  |
| Please return all correspo  | ondence concerning this matter               | to the following:  |  |
|   | Alex Perez                                   |  |  |
|   |  | Name of Person   |  |
|   | AROCEANO EXPRESS,                            | LLC  |  |
|   |  | Firm/Company   | <del></del>  |
|   | PO BOX 522131                                |  |  |
|   | <del> </del>                                 | Address  | <del> </del>   |
|   | Miami, FL 33152                              |  |  |
|   |  | City/State and Zip Code  | <del></del>  |
|   | aroexpress01@gmail.com                       |  |  |
|   | E-mail address: (                            | to be used for future annual report noti                             | fication)  |
| For further information of  | oncerning this matter, please c              | all:   |  |
| Alex Perez  |  | 786 470-2001<br>at ( )   |  |
| Name o  | f Person                                     |  | e Telephone Number   |
| Enclosed is a check for t   | he following amount:                         |  |  |
| \$25.00 Filing Fee  | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)  | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Address Registration: Division of C P.O. Box 632 Tallahassee, | Section<br>Corporations<br>27                | Street Address: Registration Second Division of Core The Centre of T | porations  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

AROCEANO EXPRESS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{07/28/2006}{1}$ Florida document number L06000074733 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

City

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 |
|--------------|------------------|-------------------------------|----------------|
| MGRM         | Dairon Gonzalez  | 2900 NW 112th Ave, Unit 1 E19 | □Add           |
|              |                  | Miami, FL 33172               | Remove         |
|              |                  |                               | □Change        |
| MGRM         | Francisca Guzman | 2900 NW 112th Ave, Unit 1 E19 | ≣Add           |
|              |                  | Miami, Fl. 33172              | □Remove        |
|              |                  |                               | □Change        |
|              |                  |                               |                |
|              |                  | <del></del>                   | □Remove        |
|              |                  |                               | □Change        |
|              | <del></del>      |                               | □Add           |
|              |                  |                               | □ Remove       |
|              |                  |                               | ☐Change        |
|              |                  |                               | □Add           |
|              |                  |                               | □Remove        |
|              |                  |                               |                |
|              | <del></del>      |                               | □Add           |
|              |                  |                               | □ Remove       |
|              |                  |                               | □Change        |

| fective date, if other than the date of filing:  |
|--|
| ecord 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 is filed. |
| ted Monday, June 29 2020   |
|  |
| Signature of a member or authorized representative of a member   |
| Alex Perez   |

Filing Fee: \$25.00