109000095645

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	<u> </u>
(Cit	ty/State/Zip/Phone	
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PICK-UP	WAIT	MAIL
· (Bu	siness Entity Nan	ne)
(Do	cument Number)	
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D. BRUCE

MAY 11 2010

MINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 27, 2010

DANIELA M. MORELLO 3 CYPRESS BRANCH WAY #105 PALM COAST, FL 32164

SUBJECT: BIZ CARD XPRESS, LLC

Ref. Number: L09000095645

10 MAY 10 AM 8: 57

We have received your document for BIZ CARD XPRESS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 010A00010440

COVER LETTER

	istration Section ision of Corporations		
SUBJECT:	BIZ CARD XPRESS, LLC		
	Name of Limited Liability Company		
The enclosed	Articles of Amendment and fee(s) are submitted for filing.		
Please return	all correspondence concerning this matter to the following:		
	DANIELA M. MORELLO		
	Name of Person BIZ CARD XPRESS, LLC		
	3 CYPRESS BRANCH WAY #105		
	Address		
	PALM COAST FL 32164		
	City/State and Zip Code		
	bcxusa@gmail.com E-mail address: (to be used for future annual report notification)	MAY 10 AM 8	
For further in	formation concerning this matter, please call:	8: 57	
	DANIELA M. MORELLO at (386) 445-6300 Name of Person Area Code & Daytime Telephone Number		
Enclosed is a	check for the following amount:		
[∕]\$ 25.00 Fi	Certificate of Status Certified Copy Certificat (additional copy is enclosed) Certified	te of Status &	
·	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

BIZ	CARD XF	RESS, LLC	,		
(Name of the Limited L (A F	iability Compar lorida Limited L	y as it now appe lability Company	ars on our records.)		
The Articles of Organization for this Limited Liab		were filed on	October 5, 2009	and assigned	
Torida document riamosi	·				
This amendment is submitted to amend the follow	ving:				
A. If amending name, <u>enter the new name of t</u>	he limited liabi	lity company h	ere:		
В	ZCARD XPF	RESS, LLC			
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ted Liability Com	pany," the designation '	'LLC" or the abbreviation	
Enter new principal offices address, if applicable:		BIZ CARD	KPRESS, LLC	高版 6	
(Principal office address MUST BE A STREET	ADDRESS)	3 CYPRESS	BRANCH WAY	#105	
		PALM COA	ST, FL 32164	552 5 F	
				mg a in	
Enter new mailing address, if applicable:			31, 2 = = = 1, = = = = = = = = = = = = = = = 	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)			BRANCH WAY	株105 9	
	PALM COA	ST, FL 32164			
B. If amending the registered agent and/or registered agent and/or the new registered office	-		our records, enter	the name of the new	
Name of New Registered Agent:	DANIELA M	. MORELLO			
New Registered Office Address:	3 CYPRESS	BRANCH W	'AY #105, PALM (COAST, FL 32164	
Enter Florida street address					
	PA	LM COAST	, Florida	32164	
		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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR-Man MGRM = M	ager anaging Member	u Se a 🍃	
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR_	Daniela M. Morello	Daniela M. Morello 3 Cypress Branch Way #105 Palm Coast, FL. 32164	Add Remove
MGR_	Elias G. Papadeas	Elais G. Papadeas 455 N. Volusia Ave. Orange City, FL. 32763	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter ch	ange(s) here: (Attach additional sheets, if necesso	ary.)
<u> </u>			IN FD
Dated		20100 The property of a member and a member of a memb	
	T ₁ ,	Daniela M. Morello /ped or printed name of signee	
	1 y	ped of printed name of aighte	

Page 2 of 2

Filing Fee: \$25.00