## 110000029423

(Requestor's Name)				
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(City/State/ZID/FiloHe #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Cartification of Status				
Certified Copies Certificates of Status				
Consideration to Filling Officer				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE

## **COVER LETTER**

	ration Section on of Corporations	<del>,</del>		
CUDIECT.	RADI.	ANT EXPRESS, LLC		
SUBJECT:		ted Liability Company		
The enclosed A	ticles of Amendment and fee(s) are sul	omitted for filing.		
Please return all	correspondence concerning this matter	to the following:		
	K	LAUSHIK JOSHI		
		Name of Person		
		Firm/Company		
	542	5423 TWIN CREEKS DRIVE		
		Address		
	VA	ZRICO, FL 33594-8283		
	i	City/State and Zip Code		
	E-mail address: (	shikaushik@gmail.com to be used for future annual report notification)		
For further info	mation concerning this matter, please	all:		
	KARAN NAYEE	at (8/3) 8/0 - 2666  Area Code & Daytime Telephone Number		
	Name of Person	Area Code & Daytime Telephone Number		
Enclosed is a ch	eck for the following amount:			
\$25.00 Filing	g Fee \$\bigcup\$\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	MAILING ADDRESS: Registration Section Division of Corporations	STREET/COURIER ADDRESS: Registration Section Division of Corporations		
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RADIANT EXPRESS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 03/17/2010 and assigned The Articles of Organization for this Limited Liability Company were filed on Florida document number \_L10000029423 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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 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 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 = Ma MGRM = N	nager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ASHISH PATEL	15417 LAKE BELLA VISTA DRIV TAMPA, FL 33625	Add Remove
***************************************			Add Remove
			Add Remove
<del></del>			Add Remove
	· <del></del>		Add Remove
			Add Remove
D. If amen	ding any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary	7
_			SEP 10 PI
Dated	August 31,	2012	PH 4: 10
	KA	nber or authorized representative of a Hember HUSHIK TOSHI ped or printed name of signee	

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Filing Fee: \$25.00