

L10000092488

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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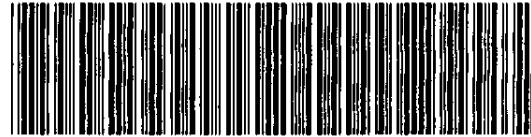
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

JAN -7 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SERVICES EXPRESS OF JAX 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:

OSVANNY BORGES-CRUZ

Name of Person

SERVICES EXPRESS OF JAX LLC

Firm/Company

5131 BATLEY RD

Address

JACKSONVILLE FL 32210

City/State and Zip Code

servicesexpressofjax@hotmail.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

OSVANNY BORGES-CRUZ

Name of Person

at (**904**)

367-8643

Area Code & Daytime Telephone Number

Enclosed is a check for the 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 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

SERVICES EXPRESS OF JAX LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 09/02/2010 and assigned
Florida document number L10000092488.

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:

4438 KENNEDY CT

(Principal office address MUST BE A STREET ADDRESS)

JACKSONVILLE FL 32207

Enter new mailing address, if applicable:

4438 KENNEDY CT

(Mailing address MAY BE A POST OFFICE BOX)

JACKSONVILLE FL 32207

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:

4438 KENNEDY CT

Enter Florida street address

JACKSONVILLE

Florida

32207

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

GRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	TANIA PEREZ	5131 BATLEY RD JACKSONVILLE FL 32210	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	GABRIELA BORGES -COL	5131 BATLEY RD JACKSONVILLE FL 32210	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	AMARELYS ALFONSO	4438 KENNEDY CT JACKSONVILLE FL 32207	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

I WANT TO REMOVED TANIA PEREZ , GABRIELA BORGES

AND ALSO ADD TO AMARELYS ALFONSO TO THE COMPANY AND NEW
OFFICE ADDRESS

Dated 01/03/2011

Signature of a member or authorized representative of a member

OSVANNY BORGES-CRUZ

Typed or printed name of signee

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