## L11000019568

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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12 MAR 22 AM IO: 5 SECKLIJARY OF STAT FALLAHASSEE, FLORI

N. Guillgan MAR 23 20124

## **COVER LETTER**

	ration Section on of Corporations					
SUBJECT:		Р	DSN,LLC			
^	•	Name of Lim	ited Liability Company			•
The enclosed Ar	ticles of Amendment	and fee(s) are su	bmitted for filing.			
Please return all	correspondence conc	erning this matte	er to the following:		·	
			Milton V. Volz III			
			Name of Person			
	PDSN, LLC					
	•		Firm/Company			
	·	461 Eas	st Hillsboro Blvd., Suit	te 100-1		
	Address					
		De	erfield Beach, FL 334	141		
	City/State and Zip Code					
		1	volzm@bellsouth.net			
		E-mail address:	(to be used for future annual rep	port notification)		
For further infor	mation concerning th	is matter, please	call:			
	Milton V. Vol	z III	at ( 954 )	. 573-2		
	Name of Person		Area Code &	k Daytime Teleph	none Number	
· · · · ·	•					
Enclosed is a ch	eck for the following	amount:				
\$25.00 Filing	g Fee \$30.00 Certi	Filing Fee & ficate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e		Certified C	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

FILED

12 MAR 22 AM 10: 52

800 Ot . 1000 . . .

PDSN		TALLAHASSE	Ur STATE E EL ODINA	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appea Liability Company)	rs on our records.)	-, r coniug	
The Articles of Organization for this Limited Liability Company	were filed on	02/15/2011	and assigned	
Florida document number L11000019568				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company her	<u>·e</u> :		
XpressRoa	am, LLC			
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compa	nny," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:	461 East Hillsboro Blvd.			
(Principal office address MUST BE A STREET ADDRESS)	Suite 100-1			
· · · · · · · · · · · · · · · · · · ·	Deerfield Bea	ach, FL 33442		
Enter new mailing address, if applicable:	Same As Abo	ove		
(Mailing address MAY BE A POST OFFICE BOX)	ALL STEPHENS		- Control of the Cont	
B. If amending the registered agent and/or registered of	Top address on a	our records enter t	he name of the now	
registered agent and/or the new registered office address her		our records, enter d	ne hame of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	En	ter Florida street addi	ress	
	, Florida			
	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

MGRM = Managing Member **Title** <u>Name</u> **Address** Type of Action MGRM VERGE, STEWART J 3582 GRANDE TUSCANY WAY ☐ Add **NEW SMYRNA BEACH FL 32168** ✓ Remove MGRM WILLIAMS, STEVE M 7999 N FEDERAL HIGHWAY 4TH FLO 17 Add BOCA RATON FL 33487 Remove MGRM. **BLOOM, JONATHAN** 2295 CORPORATE BLVD NW ☑ Add SUITE 117 Remove **BOCA RATON, FL 33431** Add Remove  $\prod Add$ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MARCH 19 2012 Dated Signature of a member or authorized representative of a member MILTON V. VOLZ III Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00