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(((H12000218924 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305)634-3694

Fax Number

: (305)633-9696

**Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please. **

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN UNITED HAULING EXPRESS LLC

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September 5, 2012

FLORIDA DEPARTMENT OF STATE Division of Corporations

UNITED HAULING EXPRESS LLC 9706 SW 133RD TER MIAMI, FL 33176US

SUBJECT: UNITED HAULING EXPRESS LLC

REF: L11000047757

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed. MR is NOT a proper

If you have any further questions concerning your document, please c (850) 245-6051.

Tammy Hampton Regulatory Specialist II

Registration/Qualification Section

FAX Aud. #: E12000218924 Letter Number: 312A00022527

P.O BOX 6327 - Tallahassee, Florida 32314

4120002184124

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED.

12 SEP -6 AM 9: 59

SEGNAL AND CHAILE SEE, FLORIDA

United	Hauling Express LLC	
(Name of the Limited Lia (A Flor	pility Company as it now appears on our rida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liabili		and assigned
Florida document number 1100004775	<u>-7</u>	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable		
(Principul office address MUST BE A STREET AI	DDRESS)	
		
Enter new mailing address, if applicable:		
(Muiling address MAY BE A POST OFFICE BOX	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office:	egistered office address on our reco address here:	rds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florid	la street address
_	City	Florida Zip Code
New Degistered Agents Signature if the city Waste	•	Lip ovac

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

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H120002 1842L

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

1

Title	<u>Name</u>	Address	Type of Action
MGRM	Ronald Gilmore	9706 SW 133 Terr Miami, FL 33176	Add Remove
MGIZM	Ida F Cesti	9706 SW 133 Terr Miami, EL 33176	Add Remove
			Add Remove
D. If amend	ing any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	_
			_ _
			
Dated	Signature of a	member of actionized representative of a member	
	Ida Fab.	Typed or printed name of signee	

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