

4110000956SC

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

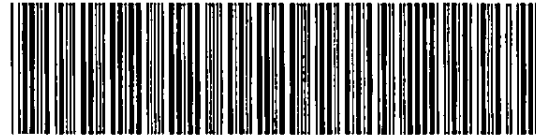
(Business Entity Name)

(Document Number)

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17 SEP 15 11:53  
FALLS CHURCH, VA  
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D SCOTT  
SEP 18 2017

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SERVIEXPRESS AM, 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:

GIUSEPPE MANISCALCO

Name of Person

Firm/Company

20155 NE 38 COURT APT 504

Address

AVENTURA, FLORIDA, 33180

City/State and Zip Code

gimaniscalco@hotmail.com

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

For further information concerning this matter, please call:

GIUSEPPE MANISCALCO

at ( 754 ) 610-4449

Name of Person

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

FILED  
SEP 15 11:53  
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

SERVIEXPRESS AM, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 08/19/2011 and assigned Florida document number L11000095650.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

20155 NE 38 COURT APT 504

(Principal office address MUST BE A STREET ADDRESS)

AVENTURA, FLORIDA, 33180

UNITED STATES

Enter new mailing address, if applicable:

20155 NE 38 COURT APT 504

(Mailing address MAY BE A POST OFFICE BOX)

AVENTURA, FLORIDA, 33180

UNITES STATES

**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:

GIUSEPPE MANISCALCO

New Registered Office Address:

20155 NE 38 COURT APT 504

*Enter Florida street address*

AVENTURA

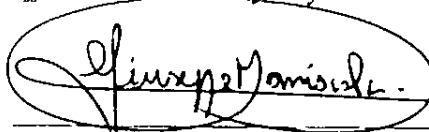
Florida 33180

*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 605, 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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SEP 15 11:03  
CLERK OF COUNTY COURT  
DADE COUNTY, FLORIDA



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

Multiple horizontal lines for amending information.

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated SEPTEMBER 06 2017

Handwritten signature of Giuseppe Maniscalco

Signature of a member or authorized representative of a member

GIUSEPPE MANISCALCO

Typed or printed name of signer

Vertical stamp on the right side of the page.