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COVER LETTER

TO: Registration Section
Division of Corporations

SUR IFCT.

279 Express 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:

Edward D Whiddon

Name of Person

279 Express LLC

Firm/Company

2993 Holmes Valley Road

Address

Vernon, FL 32462

City/State and Zip Code

Two79expressllc@yahoo.com

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

For further information concerning this matter, please call:

Edward D Whiddon

850 535-9077

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

279 Express LLC				
(Name of the Limited Liabili (A Florid	ity Company as it now appears on our rec a Limited Liability Company)	ords.)		
The Articles of Organization for this Limited Liability	Company were filed on 10/24/2011	and assigned		
Florida document number L11000121205	·			
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:				
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the desi	gnation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD	DRESS)	1		
		of Grand		
		50 8		
Enter new mailing address, if applicable:		20		
(Mailing address MAY BE A POST OFFICE BOX)		171		
	- March 1971			
		<u>ن</u> ني الله الله الله الله الله الله الله الل		
B. If amending the registered agent and/or regregistered agent and/or the new registered office		s, enter the name of the new		
registered agent and/or the new registered office ac	idi esa nere.			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida	street address		
		lorida		
	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 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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Carol Y Smith	2993 Holmes Valley Rd	Add
		Vernon, FL 32462	Remove
MGRM	Carol S Whiddon	2993 Holmes Valley Rd	Add
		Vernon, FL 32462	Remove
			Add
			Remove
			Add Add Remove
			PH [7]
			Add Remove
			_
			Add
			_

. If amendin	ig any other information, enter change(s) here: (Attach additional sheets, if necessary.)
· <u>C</u>	hanjuni name of member due
£	minuail
,	J
	
ted <u>NW</u>	ember 19, 2013.
	Edward D MM
_	Signature of a member or authorized representative of a member
E	Edward D Whiddon
_	Typed or printed name of signee
	Page 3 of 3

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Filing Fee: \$25.00

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