L12000137022

(F	Requestor's Name)
(A	Address)
(/	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
([Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:





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10 8.20.14

COVER LETTER

TO: Registration Section Division of Corporations	·
SUBJECT: EDU EXDYESS V/C	iability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and	fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	following:
Jane Joy Valeth Name of Person	
The Little Evappe Ari	Zemy
499 South Now Do	3 7 ₁
Ormand Dasch, FL =	32174
E-mail address: (to be used for future annual report notif	
For further information concerning this matter, please call:	
Name of Person at (386) 310 4980 Area Code & Daytime Telephone Number
Registration Section Re Division of Corporations Di Clifton Building P.0	egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314
Enclosed is a check for the following amount:	
□ \$25 Filing Fee □ \$	55 Filing Fee & Certified Copy

INHS18 (2/14)



August 11, 2014

JANE JOY VAETH EDU EXPRESS LLC 499 SOUTH NOVA ROAD ORMOND BEACH, FL 32174

SUBJECT: EDU EXPRESS LLC Ref. Number: L12000137022

We have received your document for EDU EXPRESS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 314A00017202

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	me of the limited liability company:
2. (a) _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) 499 South Nove Pood Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Ormand Dearth, FL 32174 Ormand Deardn, FL 3217
3.	Date of filing/registration in Florida 4. Document number
	Pol Nouse leaf Mo
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	35 BIVOCO 1000
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	Polm Coost , FL 32/64
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	Effect fiance of NEW Registered Agent and/of NEW Registered Office address.
	499 South Nova Know
	NEW Registered Office Address:
	armord beach, FL 32174
If the li	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
the cha	inge or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
was/we	ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.
the arti	by act D 1/2011
Signat	ture of a member or authorized representative of a member Printed or typed name of signee
provisi the obl to mere	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the tons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address, I hereby confirm that the limited liability company has been a limiting of this change.
Signatu	ire of Registered Agent