

L13000022613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

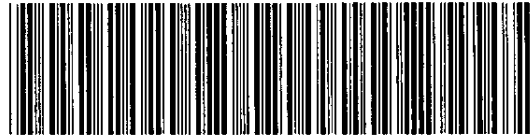
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14 JAN 21 AM 9:31

CLERK OF COURT

FILED

14 JAN 21 AM 10:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 22 2014

T. BROWN

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ROAD RUNNERS 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:

ANIBAL VALDES

Name of Person

ROAD RUNNERS EXPRESS, LLC

Firm/Company

4407 CANOPY CT

Address

KISSIMME / FL 34758

City/State and Zip Code

roadrunnersexpress@hotmail.com

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

For further information concerning this matter, please call:

Anibal Valdes

Name of Person

978 569-6014
at ()

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**

ROAD RUNNERS EXPRESS, LLC

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

FILED
14 JAN 21 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on February 12, 2013 and assigned Florida document number L13000022613.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

(Principal office address MUST BE A STREET ADDRESS)

4407 CANOPY CT

KISSIMMEE FL 34758

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME AS ABOVE

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:

ANIBAL VALDES

New Registered Office Address:

4407 CANOPY CT

Enter Florida street address

KISSIMMEE

City

Florida 34758

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

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

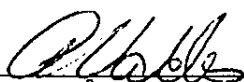
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ANIBAL VALDES	4407 CANOPY CT	<input type="checkbox"/> Add
		KISSIMMEE FL 34758	<input type="checkbox"/> Remove
MGRM	JEANE R VALDES	4407 CANOPY CT	<input type="checkbox"/> Add
		KISSIMMEE FL 34758	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

Address only

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

Dated December 19, 2013.



Signature of a member or authorized representative of a member

ANIBAL VALDES

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00