# U146000 (5272

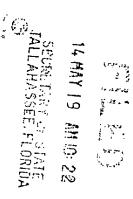
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## **COVER LETTER**

Division of Corporations					
SUBJECT: FLUSH	H USA, LLC				
SUBJECT:	Name of Limited Liability Company				
The enclosed Articles of An	Amendment and fee(s) are submitted for filing.				
Please return all correspond	dence concerning this matter to the following:				
	Sidney Menezes, Esq.				
	Name of Person	<del></del>			
	Choi & Menezes LLP				
	Firm/Company				
	1925 Brickell Avenue, Suite D-20	5			
	Address				
	Miami, FL 33129				
	City/State and Zip Code				
	E-mail address: (to be used for future annual report notification)				
For further information con-	ncerning this matter, please call:				
Sidney Mene					
Name of Po		Number			
Enclosed is a check for the	e following amount:				
□ \$25.00 Filing Fee	Certificate of Status Certified Copy C (additional copy is enclosed)	50.00 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

FLUSH USA, 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 January 28, 2014 and assigned Florida document number L14000015272
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
Eagle Express, LLC
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)
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)
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:
Now Provintened Office Address:
New Registered Office Address:  Enter Florida street address
City , Florida Zip Code To The
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

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member				
<u>Title</u>	Name	Address	Type of Action	
			Remove	
			Add	
			□ Remove	
			Add	
			□ Remove	
			Add	
			Remove	
			□ Add	
			Remove	
			Remove	

D.	If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
		. ,
Ε.		tive date, if other than the date of filing:
		1 May 15 , 2014 .
		Liquer In Jadin Signature of a member or authorized representative of a member
		Lizeika Vianeth Fernandez de Tomlinson  Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECULTIVITY OF STATE TALLATIVES SET STATE