L14 0000 72044

(Requesto	or's Name)
(Address)	
(Address)	
(City/State	e/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	s Entity Name)
(Documer	nt Number)
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

JF CARGO 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:

VANESSA TORRES

Name of Person

ALL AMERICAN PERMITS LLC

Firm/Company

5050 NW 74TH AVE SUITE 104

Address

MIAMI FL 33166

City/State and Zip Code

permits2009@live.com

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

For further information concerning this matter, please call:

Vanessa Torres

,,888、8825264

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

	F CARGO EXPRESS LLC
(Name of the Limit	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Li Florida document number <u>L14000072044</u>	
This amendment is submitted to amend the following	owing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and end with the	vords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:
(Principal office address MUST BE A STREE	T ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE)	BOX)
B. If amending the registered agent and/oregistered agent and/or the new registered of	or registered office address on our records, <u>enter the name of the new</u> fice address here:
Name of New Registered Agent:	JULIAN FORMOSO NARANJO
New Registered Office Address:	8290 IBIS CLUB LANE SUITE 902
	Enter Florida street address
	NAPLES , Florida 34102 29
New Registered Agent's Signature, if changing R	City TZip Codes.
provisions of all statutes relative to the prope accept the obligations of my position as regis	d agent and agree to act in this capacity. I further agree to comply with the er and complete performance of my duties, and I am familiar with and tered agent as provided for in Chapter 605, F.S. Or, if this document is egistered office address, I hereby confirm that the limited liability change. If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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

MGR JULIAN JORMOSO NARANJO 8290 IBIS CLUB LANE SUITE 902 NAPLES FL 34102	e of Action
MGR JULIAN JORMOSO NARANJO 8290 IBIS CLUB LANE SUITE 902 NAPLES FL 34102	Adđ
NAPLES FL 34102	Remove
	Add
	Remove
	Add
	Remove
	Add
	Remove
	3.
Ro	temove

If amending any other information, enter change(s) here: (Attach additional sheets, if necessar	ry.)
Effective date, if other than the date of filing: (optional (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after)
the date this document is filed by the Florida Department of State)	
Dated JUNE 27 , 2014	

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Filing Fee: \$25.00