# 4500004038

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
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### **COVER LETTER**

TO:	Registration Se Division of Cor		•	
CHOIL		EXPRESS TRANSPORT I	LC	
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		ENRIQUE VALIDO		
			Name of Person	
			Firm/Company	
		10 SE 4 ROAD		
			Address	·
		HOMESTEAD FL 33030		
			City/State and Zip Code	
		E-mail address: (	to be used for future annual report notific	ation)
For furt	her information co	oncerning this matter, please ca	all:	
ENRIQ	UE VALIDO		786 601-2154	
	Name of	Person	Area Code Daytime	Felephone Number
Enclose	d is a check for th	e following amount:		
<b>■</b> \$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

#### **BROTHER EXPRESS TRANSPORT 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 Co Florida document number <u>L15000004038</u>	ompany were filed on 01/18/2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		DIVS
(Principal office address MUST BE A STREET ADDRI	ESS)	AUG
	<del></del>	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
		19 1 19 7 19 7
Enter new mailing address, if applicable:		<b>~~</b>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address agent and/or the new registered office address agent.		ter the name of the new
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
Non-Bosinson de America Circulation (Colonial Desire	City	Zip Code
New Registered Agent's Signature, if changing Registered	<del></del>	
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and conaccept the obligations of my position as registered ago being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance of my duties, and Le ent as provided for in Chapter 605, F.S.	in familiar with and Or, if this document is
	If Changing Registered Agent, Signature of New	w Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DELMA I AYALA	10 SE 4 ROAD HOMESTEAD FL 33030	
			■ Remove
			Change
MGR	ENRIQUE VALIDO	10 SE 4 ROAD HOMESTEAD FL 33030	B Add
			Remove
	ENDIONE VIVIO	10.05 1.00	Change
AMBR	ENRIQUE VALIDO	10 SE 4 ROAD HOMESTEAD FL 33030	Add
			Remove
			□ Change
			Add
		<del></del>	□ Remove
			☐ Change
			☐ Remove
			Change
		<del></del>	Add
			Remove
			Change

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	5: 
fective date, if other than the date of filing:an effective date is listed, the date must be specific and cannot be prior to date	(optional)
ote: If the date inserted in this block does not meet the applicable socument's effective date on the Department of State's records.	tatutory filing requirements, this date will not be listed
seament's effective date on the 19epartment of chale's records.	
e record specifies a delayed effective date, but not an	effective time, at 12:01 a.m. on the earlier
The 90th day after the record is filed.	
AUGUST 21 2018	
/ // Voue	e Sejale
Signature of almember of authorized	representative of symember

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Filing Fee: \$25.00