

L150001511663

Florida Department of State
Division of Corporations
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From:

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Account Number : 072450003255
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TALLAHASSEE, FLORIDA

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FRESH EXPRESS LLC

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J. HARRIS

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COVER LETTER

HIS000151160

TO: Registration Section
Division of Corporations

SUBJECT: FRESH 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:

OSVALDO HERNANDEZ

Name of Person

Firm/Company

5303 S W 202 AVE

Address

City/State and Zip Code

FORT LAUDERDALE FL 33332

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

For further information concerning this matter, please call:

OSVALDO HERNANDEZ

786

543-9411

Name of Person

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



June 22, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FRESH EXPRESS LLC
6061 SW 195 AVE
PEMBROKE PINES, FL 33332US

SUBJECT: FRESH EXPRESS LLC
REF: L15000017164

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

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) 245-6051.

Jenna D Harris
Regulatory Specialist II

FAX Aud. #: H15000151166
Letter Number: 515A00012988

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FRESH EXPRESS 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 29 2015 and assigned
Florida document number L15000017164

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

5303 S W 202 AVE

(Principal office address MUST BE A STREET ADDRESS)

FORT LAUDERDALE FL 33332

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:

OSVALDO HERNANDEZ

New Registered Office Address:

5303 S W 202 AVE

Enter Florida street address

FORT LAUDERDALE

Florida 33332

City

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	PEDRO BALOGH	6061 S W 195 AVE	<input type="checkbox"/> Add
		FORT LAUDERDALE FL 33332	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	OSVALDO HERNANDEZ	5303 S W 202 AVE	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE FL 33332	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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(b) The 90th day after the record is filed.

Dated JUNE 19, 2015



Signature of a member or authorized representative of a member

OSVALDO HERNANDEZ

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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