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COVER LETTER

TO:	Registration Se Division of Cor					
CHD H	CT.		RS EXPRESS LLC			
SUBJI	ECT:	Name of Limi	ited Liability Company	-		
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
			MARTHA OTALORA			
			Name of Person			
		MO AC	COUNTING SERVICES	S CORP		
	175 FONTAINEBLEAU BLVD SUITE 2-G					
			Address			
			MIAMI, FL 33172			
			City/State and Zip Code			
			@moaccountingservices			
		E-mail address: (t	o be used for future annual	report noti	fication)	
For fur	ther information c	oncerning this matter, please ca	di:			
	NATALIA I S	ANTOS	at (954)	947	9679	
	Name o	f Person	Area Code	Daytime	e Telephone Number	
Enclos	ed is a check for th	ne following amount:				
□ \$ 2.	5.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enc		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

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

RS EXPR	ESS LLC		
ed Liability Compan (A Florida Limited Li	y as it now appears ability Company)	on our records.)	
iability Company v	vere filed on	02/05/2015	and assigned
owing:		•	
f the limited liabil	ity company her	<u>e</u> :	
vords "Limited Liabili	ty Company," the des	signation "LLC" or	the abbreviation "L.L.C."
able:	N/A		
<u>(T ADDRESS)</u>		<u></u>	
	<u>N/A</u>		
BOX)			
ANDRES VILL	EGAS ERRACE APT 20:	5	She name of the AHASSEE, FLO
DOR A L	rnier riori		
	City	, Florid	Zip Code
	ed Liability Company (A Florida Limited Liability Company vo.44 owing: f the limited liability able: ET ADDRESS) /or registered off ffice address here ANDRES VILL	(A Florida Limited Liability Company) iability Company were filed on	red Liability Company as it now appears on our records. (A Florida Limited Liability Company) iability Company were filed on

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.

f Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	ANDRES VILLEGAS	JOOSO NW 44 TERRACE APT , DORAL, FL 33178	20 5
			Remove
			☐ Change
AMBR	NATALIA I SANTOS		
		5171 W OAKLAND PARK BL LAUDERDALE LAKES, FL 33313	Remove
			Change
			Add
		- 1917 - 1917	Remove
			Change
			Add
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fective date, if other than the d n effective date is listed, the date must be ote: If the date inserted in this bloc cument's effective date on the Dep	ck does not meet the app	orior to date of fili plicable statuto	ng or more than 90 d ry filing requireme	_ (optional) ays after filing.) Pur nts, this date will	rsuant to 605.0207 (2 not be listed as th
record specifies a delayed of the 90th day after the recor	effective date, but rd is filed.	not an effec	tive time, at 1	2:01 a.m. on	the earlier of:
DECEMBER 23	2016		Λ.		
	, , , , , , , , , , , , , , , , , , , ,	•	<i>16</i> ∥	· <u>/</u>	

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Typed or printed name of signee

Filing Fee: \$25.00