Division of Corporations

## Florida Department of State

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3/26/2015

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WAGON XPRESS LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

T. Burch MAR 2 7 2015

Part Sank

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	XPRESS LLC	
(Name of the Limited Liab	lity Company as it now appears on our record da Limited Liability Company)	<u>k.)</u>
The Articles of Organization for this Limited Liability Florida document number L15000023213	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	AS 5
The new name must be distinguishable and end with the words "I	imited Liability Company," the designation "LI	
Enter new principal offices address, if applicable:		59 5
(Principal office address MUST BE A STREET ADD	RESS)	जुन <b>है</b>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		Ph u: 57
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad  Name of New Registered Agent:		s, enter the name of the now
New Registered Office Address:		
	Enter Floridu street addres	3
	Flo	orida
	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 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>	<u>N</u> ame	Address	Type of Action
P	JOSE L. RAMIREZ	15821 SW 104 TERR UNIT 107	
		MIAMI ,FL 33196	Remove
D	PATRICIA TOVAR	PATRICIA TOVAR	Add
		965 SW 151 PLACE	■ Remove
		MIAMI, FL 33194	
MGR	CYNTHIA CARDENAS	8020 SW 17 PL	S J
		DAVIE, FL 33324	A Reprove
M <b>G</b> R	MIGUEL E. REYES A.	8020 SW 17 PL	6 PH L
	MIGDEL L. RETEO A.	DAVIE, FL 33324	And And Remove
			D Remove
			<del></del>
			Add
			П Кетоув

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary,	)  		
E. Effective date, if other than the date of filing:  (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  O3/24  Signature of Prioritable or authorized representative of a member JOSEL RAMIREZ			
A Section 1. The sect	SECRETARY OF STAD	15 MAR 26 PM L: 5	