# 2061323 forian Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : ACCOUNTING REVENUE SERVICE, INC

Account Number : I20110000041

Phone : (305)887-8730

Fax Number

: (305)887-8744

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

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### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EEC EXPRESS LLC

Certificate of Status	0
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Corporate Filing Menu

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## (((H15000116075 3)))

### **COVER LETTER**

TO: Registration Se Division of Corp				
CIDIECT.	EEC	EXPRESS LLC		
SUBJECT:	Name of Lim	ited Liability Company		<del></del>
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.		·
Please return all correspon	ndence concerning this matter	to the following:		
		EIVER ESPINOSA		
		Name of Person	<del>-</del>	
		•		
		·	<u>,                                      </u>	
	•	Firm/Company	•	•
		1441 E 9TH CT		
		Address		<del></del>
		HIALEAH, FL 33010	)	
		City/State and Zip Code		<del></del>
	E-mail address: (	to be used for future annual r	eport notificati	on)
For further information a	oncerning this matter, please c	all:	•	•
	•			
EIVER ESPINOSA SOLER		at ( 561 )	412-9840	
Name of	Person	- Area Code	Daytime Tel	ephoae Number
Enclosed is a check for th	e following amount:	,	•	
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl	•	☐ \$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

## (((H15000116075 3))) ARTICLES OF AMENDMENT

# 60753))) FILED MENDMENT 2015 MAY 12 AM 8 09

### TO ARTICLES OF ORGANIZATION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

• .	EEC EXPRESS LLC		
(Name of the Limited I	Jability Company as it now appears lorida Limited Liability Company)	on our records.	
The Articles of Organization for this Limited Liabi	lity Company were filed on	04/07/2015	and assigned
lorida document numberL15000061323	·		-
his amendment is submitted to amend the followi	ng:		
. If amending name, enter the new name of th	e limited liability company he	re:	
he new name must be distinguishable and contain the words	"Limited Liability Company," the de	signation "LLC" or the a	bbreviation "L.L.C."
nter new principal offices address, if applicabl	e:		
<u>Principal office address MUST BE A STREET A</u>	DDRESS)		·
		<u></u>	
			,
inter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BO	<u> </u>		
•	<del></del>		
<ol> <li>If amending the registered agent and/or egistered agent and/or the new registered office</li> </ol>		our records, enter	the name of the r
Name of New Registered Agent:	•		
New Registered Office Address:			
	Enser Flori	da street address	
		, Florida	<u> </u>
_	City		Zip Çode

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

Page 1 of 3

## (((H15000116075 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>	Name	Address	Type of Action
MGR	EIDER ESPINOSA	1441 E 9TH CT	
		HIALEAH, FL 33010	□ Remove
			Change
· · ·			☐ Add
	• • •		☐ Remove
•	e e e e e e e e e e e e e e e e e e e		Change
	·		DAdd
•			□ Remove
· · ·			□ Change
			Add
			☐ Remove
		·	□ Change
			Add
		<del></del>	□ Remove
			Change
<del></del> _			
			□ Remove
			Change

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<u>.                                  </u>		EIVER ESPINOS  Typed or printed name			
				•	
	Signatur	e of a member or authorized	representative of a memi	er .	
		exten			
	MAY 12th				
cord sp e 90th d	ecifies a delayed effect day after the record is f	tive date, but not an filed.	effective time, at	12:01 а.m. ол і	the earlier o
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fective dat	e, if other than the date of the is listed, the date must be speci	ific and cannot be prior to dat	of filing or more than 9	(optional) days after filing.) Pur	suant to 605,020
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Filing Fee: \$25.00

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