## L15000144029

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(Address)	
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(City/State/	Zip/Phone #)
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liabi</u> (A Florid	ility Compar da Limited L	y as it now appears on our re iability Company)	ecords.)			_
The Articles of Organization for this Limited Liability Florida document number 35-2543054	Company	were filed on <u>02-20-2020</u>			_ and a	assigned
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the lin	nit <u>ed liabi</u>	lity company here:				
The new name must be distinguishable and contain the words "Li	mited Liabili	ity Company," the designation	'LLC" or the	e abbre	viation	"LLC."
Enter new principal offices address, if applicable:		1151 North Blackwood A	venue Ste 1	10	20	
Principal office address MUST BE A STREET ADD	RESS)	Ocoee Florida 34761			11.1 11.1	-;
				· ;	2	P manage - manage - manage
Enter new mailing address, if applicable:		1151 North Blackwood A	venue Ste 1	ίο	AH 8	J.
Mailing address MAY BE A POST OFFICE BOX)		Ococe Florida 34761		<u> </u>	را ان	
3. If amending the registered agent and/or registered agent and/or the new registered office address here:  Name of New Registered Agent:  Ali F			nter the n	ame o	of the 1	tew reg
1151	North Blac	ckwood Avenue Ste 110		,		
New Registered Office Address:	- North Blac	Enter Florida street a	ddress			<del></del>
Ococ	ee		, Florida	34761		
		City	, FIORIUA		Zip Coc	te

## New Registered Agent's Signature, if changing Registered Agent:

Express Construction LLC

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBER	Taraneh Rezaei	220 Lake drive Orlando Fl 32835	≣Add
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	56
ctive date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be prior to date of	filling or more than 90 days after filling.) Pursuant to 605
If the date inserted in this block does not meet the applicable stat ment's effective date on the Department of State's records.	utory thing requirements, this date will not be list
ecord specifies a delayed effective date, but not an ef ie 90th day after the record is filed.	fective time, at 12:01 a.m. on the earlie
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