Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170001192093)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 : (305)444-4977 Fax Number

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

C 1 1	Address:			
PMATI	ADDOPASS:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EPIC EXPRESS SERVICE LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

MAY 02 2017

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Limbility Comp (A Florida Limited		n our records.)
The Articles of Organization for this Limited Liability Company Florida document number L15000151646	y were filed on 09/03	/2015 and assigned
This amendment is submitted to amend the following:	A. C.	
A. If amending name, enter the new name of the limited lini	bility company here	:
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the desig	instion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		AX - YASSE
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		யா records, enter the name of the hew
Name of New Registered Agent:		
New Registered Office Address:	n) Enter Florida	street address
		, Florida
	Clay	Zlp Code
New Registered Agent's Signature, If changing Registered Agent:	i	
I hereby accept the appointment as registered agent and agr		

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

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 = M AMBR = A	anager uthorized Member		-
Title	Name	Address	Type of Action
			□ Remove
			□ Change
			□ Abb
			□ Remove
	•	,	Change
·		- ĥe	
			□ Remove
			Change Add
			Add
			Remove ထ
			Change
			D Change
		Tri l	□ Remove
			Change

INGRID MABEL ROLDAN BU	ENO AUTHORIZED MEMBER	33%
JORGE BLANCO	MANAGER	34%
JHON DOMINGUEZ	MANAGER	33%
<u> </u>		
	B.	
·		
		Ç
ective date, if other than the dat neffective date is listed, the date must be to: If the date inserted in this block nument's effective date on the Depar	specific and cannot be prior to date of filing or more than does not meet the applicable statutory filing require	(optional) 90 days after filing.) Pursuant to 605.02 ements, this date will not be listed
record specifies a delayed eff he 90th day after the record	fective date, but not an effective time, a is filed.	t 12:01 a.m. on the earlier
05/01/	2017	
x Nul	7/2/7	
- Algn	atyre of a member of authorized representative of a mon	ther

Page 3 of 3