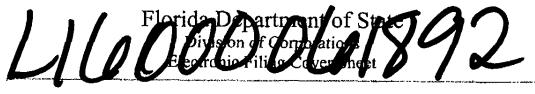
11:42 PDT

TO:18506176383 FROM:7862171243

Division of Corporations

Page:

1



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.

(((H16000098990 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JP GLOBAL BUSINESS

Account Number : I20130000083 Phone : (305)436-0093

Fax Number : (305)436-0094

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

Email Address: ____

Kell@ 1Pg business con

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN XPRESS LOGISTIC TRUCK LLC

Certificate of Status	0
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Page Count	04
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EFFECTIVE DATE 114/21/14

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Corporate Filing Menu

Help

11:42 PDT

TO:18506176383 FROM:7862171243

COVER LETTER

TO: Registration S Division of Co				
	LOGISTIC TRUCK LLC			
SUBJECT:	Name of Lim	ited Liability Company	CONTRACTOR OF A TOTAL MARKET	
The enclosed Articles of	f Amendment and fec(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	SUSANA BIJANI			
	**************************************	Name of Person		
JP GLOBAL BUSINESS SOLUTIONS INC				
	1395 BRICKELL AVE ST			
		Address	Control of the Contro	
	MIAMI, FL 33131			
		City/State and Zip Code		
	BRICKELL@JPGBUSINE			
	E-mail address: (to be used for future annual report notifi	ication)	
For further information	concerning this matter, please co	all:		
SUSANA BIJANI		305 359-3700 at ()	7A S 201	
Name	of Person	Area Code Daytime	Telephone Number LC HAT 2	T
Enclosed is a check for	the following amount: .		71-4	
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Sfalus & Certified Copy (additional copy is originated)	C

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

04/21/2016 11:42 PDT

- 1 - 1

TO:18506176383 FROM:7862171243

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

XPRESS LOGISTIC TRUCK LLC			
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	All and the second seco	
The Articles of Organization for this Limited Liability Company Florida document number L+6000061892 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	y were filed on <u>03/28/2016</u>	and assigned	
The new name must be distinguishable and contain the words "Limited Liabi	dity Company," the designation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicable:	1451 W CYPRESS CREEK RD		
(Principal office address MUST BE A STREET ADDRESS)	STE 300	* ************************************	
, , , , , , , , , , , , , , , , , , , ,	FT LAUDERDALE, FL 33309		
Enter new mailing address, if applicable:	1451 W CYPRESS CREEK RD		
(Mailing address MAY BE A POST OFFICE BOX)	STE 300		
	FT LAUDERDALE, FL 33309		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	<u>C</u> : Enter Florida street address	TALLAHASSEE	
	, Florida	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agra provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am jorovided for in Chapter 605, F.S. Or,	familiar with and if this document is	
If Char	iging Registered Agent, Signature of New Re	esicred Agent	

Page 1 of 3

EFFECTIVE DATE 042114

(HIMMON ARAANZ)

04/21/2016

11:42 PDT

TO:18506176383 FROM:7862171243

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
AR	DANIEL GABAS	1451 W CYPRESS CREEK RD	
		STE 300	□ Remove
		FT LAUDERDALE, FL 33309	D Ct.
AR	JUNIOR CHIQUE	1451 W CYPRESS CREEK RD	
		STE 300	□ Remove
	·	FT LAUDERDALE, FL 33309	☐ Change
			☐ Add
			□ Remove
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			□ Remove
			☐ Change

1/21/2016	11:42 PDT	TO:18506176383	FROM: 7862171243	max9955
D. If am	ending any other info	rmation, enter change(s) her	e: (Attach additional sheets, if n	
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(If an ei <u>Note:</u>	. If the date inserted in th	e must be specific and cannot be prior	to date of filing or more than 90 days af able statutory filing requirements, t	tional) ter filing.) Pursuant to 605.0207 (3) his date will not be listed as the
If the re	cord specifies a dela	eyed effective date, but no	t an effective time, at 12:01	. a.m. on the earlier of:
• •	e 90th day after the	record is filed.		
Dated	04/21/2016		1	
	76	0 0 8		
	- Pa-	Signature of a member or author	rized representative of a member	
	DANIEL GABAS			
	DAMEL GADAS	Typed of prints	d name of signee	The state of the s

Page 3 of 3

Filing Fee: \$25.00