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S. WARREN NOV 02 2017

COVER LETTER

Division of Corporations	
SUBJECT: YFD FAME of Limited Liability	
Name of Limited Liability	Company
The enclosed Articles of Amendment and fee(s) are submitted for f	ling.
Please return all correspondence concerning this matter to the follow	ving:
Erich For	· -
Name	of Person
Firm	Company
1844 Mandas	C+
1854 Meadow	ldress
West Palm Reach	FZ 33406
E-mail address: (to be used fo	future annual report notification)
For further information concerning this matter, please call:	
Frick Fent at (rea Code Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status Cert	0 Filing Fee & S60.00 Filing Fee, fied Copy 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

11) Express LC	and the same and t
(Name of the Limited Liability Compa (A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1.1600.304899.	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi	
Enter new principal offices address, if applicable:	1884 Meartew C+
(Principal office address MUST BE A STREET ADDRESS)	West Polm Trach, FL, 33406
	1884 Meadow Ct
Enter new mailing address, if applicable:	Lest Pelm Recd, FC, 33466
(Mailing address MAY BE A POST OFFICE BOX)	1100+ 10101 18001, 12,5500
registered agent and/or the new registered office address her	<u> </u>
	int Canbaca
New Registered Office Address: 1854 /	Meccas Ct Enter Florida street address
West I	City Sech Florida 23402

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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u> </u>	CEDAL Ramos	4910 Everylades BUDN	🗆 Add
		Naples, FZ, 34120	
			Change
<u> </u>	Enck Font	1884 Meadow ct	
		West Palm Beach, FL, 33400	, □ Remove
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f amending any other information, enter change(s) ho		
		
	<u> </u>	
ffective date, if other than the date of filing:		(optional)
Tan effective date is listed, the date must be specific and cannot be proposed. If the date inserted in this block does not meet the approximent's effective date on the Department of State's record	licable statutory filing requiremen	es after filing.) Pursuant to 605.020' ts, this date will not be listed as
e record specifies a delayed effective date, but The 90th day after the record is filed.	not an effective time, at 12	:01 a.m. on the earlier o
ated		
?~	-	표용 ===
Signature of a member or at	uthorized representative of a member	*** ****
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Taccoccline Lorg	inted name of signee	
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Pa	ige 3 of 3	
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Filing Fee: \$25.00