117000119650

(Req	uestor's Name)	
(Add	ress)	
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(City)	/State/Zip/Phon	e #)
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(Doc	ument Number))
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SCORE TARY OF STAIL DIVISION OF CORPORATIONS

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COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	32 XPres	CLLC	
		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	YORDAMIS REYES		
		Name of Person	
	M3R XPRESS LLC		
		Firm/Company	
	10616 153RD RD.		
		Address	•
	LIVE OAK, FL 32060		
		City/State and Zip Code	
	M3RXPRESS@GMAIL.C		
		to be used for future annual report no	otification)
For further information	concerning this matter, please co	all:	
YORDAMIS REYES		786 259-3108 at ()	
Name	of Person	Area Code Dayti	me Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Regisi Divisi P.O. I	ANG ADDRESS: ration Section on of Corporations 30x 6327 assee, F1, 32314	STREET/COUI Registration Sect Division of Corp Clifton Building 2661 Executive C	orations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M3R APRESS LLC		
(Name of the Lim	ted Liability Company as it now appears on ou (A Florida Limited Liability Company)	r records.)
The Articles of Organization for this Limited l Torida document number L17000119650	iability Company were filed on	and assigned
his amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability company here:	
he new name must be distinguishable and contain the	words "Limited Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if appli	cable:	
<u>Principal office address MUST BE A STRE</u>	ET ADDRESS)	
		
Inter new mailing address, if applicable:		6 P
Mailing address MAY BE A POST OFFICE	BOX)	25 25 35 35 35 35 35 35 35 35 35 35 35 35 35
		00 :: 3::0
3. If amending the registered agent and egistered agent and/or the new registered of New Registered Agent:		records, <u>enter the name of the</u>
New Registered Office Address:		
<u> 150 to garejsa viras viras anticia</u> .	Enter Florida stre	ot address
		, Florida
	Cuy	Zip Code

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 conform that the limited liability company has been notified in writing of this change.

If Changing Review 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>	<u>Address</u>	Type of Action
MGR	Yordamis Reyes	10616 153rd Rd.	■ Add
		Live Oak, FL 32060	Remove
			Change
MGR ———	Alain Ruiz	10616 153rd Rd.	Add
		Live Oak, FL 32060	■ Remove
			Change
		-	
			□ Remove
			☐ Change
			Remove
			□ Change
			Remove
			Change
		-	Add
			Remove
			□ Change

		
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ffective date, if other tha	n the date of filing:	(optional)
f an effective date is listed, the di Note: If the date inserted in	n the date of filing: te must be specific and cannot be prior to date of filing or more his block does not meet the applicable statutory filing r	than 90 days after filing.) Pursuant to 605.0
	the Department of State's records.	equirements, tins date with her be listed
e record specifies a de The 90th day after th	ayed effective date, but not an effective time record is filed.	ne, at 12:01 a.m. on the earlier
June 4th	2018	
	* /	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00