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(Re	questor's Name)	
	dress)	
(Ad	aless)	
(Ad	dress)	
·	·	
(Cit	y/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
<u>—</u>	_	<u>—</u>
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Certified Copies	_ Ocitinoates	- Ol Otatus
Special Instructions to	Eiling Officer:	
Special instructions to	r illing Officer.	
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Office Use Only



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COVER LETTER

Division of Corp	orations		
SUBJECT: 5		ited Liability Company	17060-170 2 117
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
	GESHER	JEAN PHIL Name of Person	iPPE
	S&L	EXPRESS L	LC
	449 B	KINGSLEY	AVe.
	ORANGE	PARK FL3 City/State and Zip Code	2073
	SLEXPRESS / Firmail address: (to	o be used for future annual report noti	DW fication)
For further information cor	ncerning this matter, please ca	ll:	
GESHER Name of I	JENU PHILIPERSON	Area Code Daytim	0557 e Telephone Number
Enclosed is a check for the	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)

MAILING ADDRESS:

. TO: · Registration Section

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

SELEXPRES L	160		
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on o ed Liability Company)	ur records.)	
The Articles of Organization for this Limited Liability Compa	nny were filed on <u>07</u> -	<u>-30 –2018</u> and assi	gned
This amendment is submitted to amend the following:			
_			
A. If amending name, enter the new name of the limited li	iability company here:		
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designat	tion "LLC" or the abbreviation "L.L	C."
Enter new principal offices address, if applicable:			0
(Principal office address MUST BE A STREET ADDRESS))	18 /	SIA
		3U	22F
		<u> </u>	
Enter new mailing address, if applicable:	office address MUST BE A STREET ADDRESS) Office address MUST BE A STREET ADDRESS) Office address MUST BE A STREET ADDRESS)	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)			77.74 77.74 77.74
	•	<u> </u>	<u> </u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		records, enter the name o	<u>f the ne</u>
Name of New Registered Agent:			
New Registered Office Address:		· · · · · · · · · · · · · · · · · · ·	
	Enter Florida stre	eet address	
	City	, Florida Zip Code	
New Registered Agent's Signature, if changing Registered Age		np con	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compleaccept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officompany has been notified in writing of this change.	ete performance of <mark>m</mark> y di is provided for in Chapte	ities, and I am familiar with er 605, F.S. Or, if this docum	and nent is

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

Title	<u>Name</u>	Address	Type of Action
CEO	GESHER DULL PO-	JACKSONVILLE FZ 32202	DK #201
	JEANPHILITPE		D Remove
	,		Change
MGR	SONY ST. FLEUR	1071 NAPLELN ORANGE PARK FL 320	td/Add
		OKN POETAGE PE SE	Remove
			D Change
			□ Add
			C Remove
			_D Change
			_□ Add
			Remove
			Change
			_□ Add
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			_□ Remove
			Character 1

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Page 3 of 3

Filing Fee: \$25.00