L18000073509

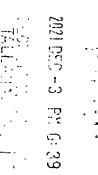
(Requestor's Name)
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PICK-UP WAIT MAIL
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COVER LETTER

Registration Section

Division of Cor	porations	Na.	è		
	ELLENCE EXPRESS LLC	er '	;		
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	LEO ABREU				
		Name of Person			
	N7N EXCELLENCE EXP	RESS LLC			
	Firm/Company				
	1413 LAKE AVE				
		Address			
	LEHIGH ACRES, FL 339	72			
		City/State and Zip Code	2921 Tr		
	labreu@nnexcellence.com	to be used for future annual report no	tification)		
For further information c	oncerning this matter, please c	•	: L		
LEO ABREU		239 440-9469	, to		
	6 D	at ()	me Telephone Number		
Name o	f Person	Area Code Dayti	me Telephone Number (-;)		
Enclosed is a check for the	ne 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		Street Address:	action		
Registration Solution of C		Registration S Division of Co			
P.O. Box 632	•	The Centre of	Tallahassee		
Tallahassee,	FL 32314	2415 N. Monr	oe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

N&N EXCELLENCE EXPRESS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(A Florida Limited Liability Compai	ny)		
The Articles of Organization for this Limited Liability Company were filed on Florida document number L18000073509	03/21/2018	and assi	gned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company	y here:		
The new name must be distinguishable and contain the words "Limited Liability Company," t	the designation "LLC" or the a	ibbreviation "L.I	C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	14757		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office address on or agent and/or the new registered office address here:	ır records, <u>enter the nar</u>	ne of the new	registered
Name of New Registered Agent:		102 <u>1</u>	,-
New Registered Office Address:		5 5	- <u> </u>
Enter	Florida street address	် ယ်	41
	, Florida		. + d
City		Zip Code	- پينهن
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 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>	Name	<u>Address</u>	Type of Action
AR	JANNETT ABREU PACHECO	1413 LAKE AVE	
		LEHIGH ACRE, FL 33972	■Remove
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ective date, if other than the date of filing:			(option	-al\	
n effective date is listed, the date must be specific and cannot be te: If the date inserted in this block does not meet the ap	prior to date o	of filing or more the	han 90 days after f	iling.) Pursu	ant to 605.020
cument's effective date on the Department of State's rec		nutory ming rec	junements, tilis	uaic will in	or oc nated a
ecord specifies a delayed effective date, but not an effective filed.	ive time, at	12:01 a.m. on th	e carlier of: (b)	The 90th	day after the
NOVEMBER 29TH 2021					
	·				
Signature of a member or	•				

Filing Fee: \$25.00