## 118000 112824

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## **COVER LETTER**

TO:	Registration S Division of C							
SUBJEC	Name of Limited Liability Company							
The encl	losed Articles o	of Amendment and f	ce(s) are subn	nitted for filing.				
Please re	eturn all corres	pondence concernin	g this matter t	to the following:				
			OLTI	MARKU Name of Person				
		<del>-</del>	CHEX	(PRESS, LLC Firm/Company	<del></del>			
			3173 1	24th Terrace Address				
			ARGO,	City/State and Zip Code Ci O No mai C o be used for future annual report				
		<u>Oinje</u>	20V0Si nail address: (te	Ci O NotmaiC o be used for future annual report	notification)			
For furth	ner information	concerning this ma	tter, please ca	11:				
74	JEZA Name	MITRKU of Person	IMGR	at ( <u>727</u> ) <u>56</u> Area Code Day	C - 2880			
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Enclosed	l is a check for	the following amou	int:					
<b>ઇ \$</b> 25.	00 Filing Fee	□ \$30.00 Filin Certificate	g Fee & 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:

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

CM EXPRESS, LL	
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L 18000 112824</u>	were filed on MAY OUIZOI8 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.T.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	8173 124 th Terrace LARGO, E1 33773
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8173 124th Terrace LARGO, FL 33773
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent:	No CHange on the name
New Registered Office Address: 8173	124th Terrace  Enter Florida street address
<del></del>	City Florida 33773 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 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, 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
MGR	HIJESA MARKU	8173 124th terrace	
		LARGO, FL 33773	Remove
			O'Change oddress
			Add
			☐ Remove
			☐ Change
		<del></del>	Office Change
			Remove
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Effectiv	ve date, if other th	an the date of f	iling: <u>July</u>	18,2016	3	_ (optional)	
Note:	ective date is listed, the If the date inserted in ent's effective date o	n this block does n	ot meet the application	able statutory			
he rec	ord specifies a d	elaved effectiv	ve date but no	t an effect	ive time lat 1	2·01 a m	on the earlie
The	90th day after ti	he record is file	ed.				J., 1.12 CO111C
	<u>Necember</u>	2 6th 20	18	·			
Dated_			_				
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