

L18000 134214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

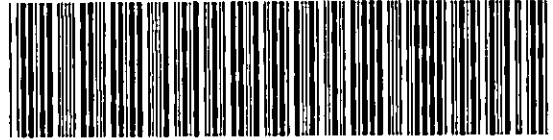
(Business Entity Name)

(Document Number)

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2018 DEC 17 PM 4:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4119

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CORBATA EXPRESS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PACHECO MARIA

Name of Person

CORBATA EXPRESS LLC

Firm/Company

630 SE 4 TH STREET

Address

MIAMI FL 33010

City/State and Zip Code

CORBATAEX@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DIEGO VILLANUEVA

305 9302901
at ()

Name of Person

Area Code

Daytime 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:

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**

CORBATA EXPRESS LLC

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

The Articles of Organization for this Limited Liability Company were filed on 05/30/2018 and assigned
Florida document number L18000134214.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

DIEGO VILLANUEVA

6645 SHERIDAN ST

HOLLYWOOD FL 33024

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6645 SHERIDAN ST

DAVIE FL 33024

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

DIEGO VILLANUEVA

New Registered Office Address:

6645 SHERIDAN ST

Enter Florida street address

HOLLYWOOD


Florida 33024

City

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.


Diego Villanueva
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>	<u>Type of Action</u>
MGR	PACHECO MARIA	630 SE 4 TH STREET	<input type="checkbox"/> Add
		MIAMI FL 33010	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DIEGO VILLANUEVA	6645 SHERIDAN ST	<input checked="" type="checkbox"/> Add
		HOLLYWOOD FL 33024	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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TALLAHASSEE, FLORIDA

ALLAHSSEE. F. ORIPPA

F. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 12/12, 2018

Diego Villanueva

Signature of a member or authorized representative of a member

DIEGO VILLANUEVA

Typed or printed name of signee