(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Free Amendment due
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COVER LETTER

	Registration Se Division of Cor			
ello inc		EXPRESS VAN LINES IN	С	
SUBJEC	T:	Name of Lim	ited Liability Company	 -
The enclo	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspoi	ndence concerning this matter	to the following:	
		BRAD STOCKDALE		
			Name of Person	· · ·
		NATIONAL EXPRESS V	AN LINES INC	
			Firm/Company	-
		1711 WORTHINGTON F	RD. SUITE 107	
			Address	-
		WEST PALM BEACH/FL	_ 33409	
		<u>. </u>	City/State and Zip Code	-
		BRADESTOCKDALE@A		
			to be used for future annual report notific	cation)
For furthe	er information co	oncerning this matter, please ca	all:	
BRAD S	TOCKDALE		484 4311328 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	is a check for the	e following amount:		
□ \$25.0	0 Filing Fee	S30.00 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

SECREMENT OF VINE	2018 JUL 12 F	
	#: #:	C

NATIONAL EXPRESS VAN LINES INC

(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	v wers filed on 07/02/2018	and ancies of
Florida document number L18000160256	y were then on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
NATIONAL EXPRESS VAN LINES LLC		
The new name must be distinguishable and contain the words "Limited Liab	ility 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)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	office address on our records, e:	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Flor	
	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 affice 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>	Address	Type of Action
			□ Add
			□ Remove
			Change
		7/	Add
			□ Remove
			☐ Change
			Add
			□ Remove
			Change
			☐ Remove
			Change
			☐ Remove
			☐ Change
			□ Remove
			Change

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Note: If the date inserted in this b	date of filing: (optional) be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuantick does not meet the applicable statutory filing requirements, this date will not spartment of State's records.	nt to 605.0207 (3 be listed as th
f the record specifies a delaye b) The 90th day after the re	effective date, but not an effective time, at $12:01\ a.m.$ on the ord is filed.	earlier of:
07/11 Dated	2018	
Dated		
	Signature of a member or authorized representative of a member	
	organitude of a member of authorized representative of a member	
BRAD STOCKDALE		

Page 3 of 3

Filing Fee: \$25.00