L18000 202525

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COVER LETTER

Division of Co	rporations		
SUBJECT:	Mi Mark Name of Limi	et Express	LLC
SUBJECT: Market 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: Alhomy Gonzalez Name of Person His Harket Express LLC Firm/Company 2668 Palm Av. Address Hisleah F. 33010 City/State and Zip Code market store place Q gmail. com E-mail address: (to be used for future annual separa notification) For further information concerning this matter, please call: Alhomy Gonzalez at 954 643 90 50 Native of Person Native of Person Area Code Daytime Telephone Number			
Please return all corresp	ondence concerning this matter t	to the following:	
	alh	оту Болга	le Z
	Mi Ma	erket Express	LC
	2668	Palm Av.	
		Address	
	Hialean	, A. 3301C	
	market 9 E-mail address: (1	City/State and Zip Code 1010 place a gmai to be used for future annual seport noti	fication)
For further information	concerning this matter, please ca	ail:	
alhomy	Gonzalez	at (<u>954</u> <u>643</u> Area Code Daytins	9050 e Telephone Number
Enclosed is a check for	the following amount:		
∑ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 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

TO:

Registration Section

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2.2.1 13 F! 1:55 Liability Company as if now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on $\frac{08/23/2018}{}$ and assigned Florida document number L18000202525 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." 1146 w 68 St. Hialeah, fl. 33014 Enter new principal offices address, if applicable: (Principal office address MUST BE A_STREET ADDRESS) 1146 w 68 St. Hialeah, fl. 33014 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 our records, enter the name of the new registered agent and/or the new registered office address here: Alhomy Gonzalez Name of New Registered Agent: 1146 w 68 St. Hialcah, fl. 33014 New Registered Office Address: Enter Florida street address Hialcah.

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
P	Guerra Acevedo, Gladys J.	7075 NW 186th St # C505 Hialeah, fl. 33015	🗆 ^dd
			≣Remove
P Alho	Alhomy Gonzalez	1146 w 68 St. Hialcah, fl. 33014	■Add
			Remove
			□Change
			□Add
			Remove
			□ Change
			□Remove
			□Change
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			Change
			□Add
			□Remove
			□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
P	Guerra Acevedo, Gladys J.	7075 NW 186th St # C505 Hialeah, fl. 33015	□Add
			Remove
			Change
P	Alhomy Gonzalez	1146 w 68 St. Hialeah, fl. 33014	
			Remove
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			□Change
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			□Remove
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D Huma	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
D. II ame	iding any other information, enter change(s) here. (Anderi dadminial sheets, if necessary.)
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(If an effe Note:	ve date, if other than the date of filing: 09/16/2020 (optional) extive 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
If the record record is file	d 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 ed.
Dated _	September 16. 2020
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00