

L18000202525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

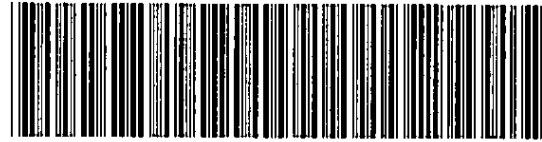
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J. HORNE

OCT 12 2022

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09/18/22--01014--024 **60.00

FILED
2022 OCT 12 PM 3:59
SECRETARY OF THE
TALLAHASSEE COUNTY
2022 OCT 12 PM 3:55
SECRETARY OF THE
TALLAHASSEE COUNTY

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MI 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:

ROBERTO ROSA REYES

Name of Person

MI MARKET EXPRESS LLC

Firm/Company

1280 West 54th ST., Apt. 105

Address

Hialeah, FL 33012

City/State and Zip Code

RR0BER305@GMAIL.COM

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

For further information concerning this matter, please call:

ROBERTO ROSA REYES

Name of Person

at (

786

)

792-4511

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe St., Tallahassee, FL 32309

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MI MARKET EXPRESS LLC

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

FILED
2022 OCT 12 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 10/13/2020 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:

n/a.

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)

1280 West 54th ST., Apt 105

Hialeah, FL 33012

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1280 West 54th ST., Apt 105

Hialeah, FL 33012

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:

ROBERTO ROSA REYES

New Registered Office Address:

1280 West 54th ST., Apt 105

Enter Florida street address

HIALEAH

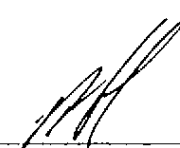
Florida 33012

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.


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>
AMBR	LAZARA L LOPEZ DELGADO	490 W 53rd ST, Hialeah, FL 33012	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	YUDIEL YIGOA ALFONSO	490 W 53rd ST, Hialeah, FL 33012	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ROBERTO ROSA REYES	1280 West 54th ST., Apt. ¹⁰⁵ 103 , Hialeah, FL 33012	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

n/a

E. Effective date, if other than the date of filing: 8-30-22 (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 8-30, 2022

Lazara L. Lopez Delgado

Signature of a member or authorized representative of a member

LAZARA L. LOPEZ DELGADO

Typed or printed name of signee