h19000047230

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SECRETARY OF STATE TALLAHASSEE, FL

2022 AUG -1 PH 4: 47

COVER LETTER

TO:

Registration Section Division of Corporations

ennarer.	INVESTM	ENT EXPRESS LLC			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	AB	DULSALAM ALANESI			
		Name of Person			
	INV	ESTMENT EXPRESS LLC			
		Firm/Company			
		12938 GARRIDAN AVE			
		Address			
	W	WINDERMERE, FL 34786			
		City/State and Zip Code			
		sammyalanesi@gmail.com			
	E-mail address: (to be used for future annual report noti	fication)		
For further information e	oncerning this matter, please c	all:			
ABDULSALAM ALANESI		407 910-8083			
Name o	f Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	ne 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 5 Division of C P.O. Box 632 Tallahassee.	Section Corporations 27	Street Address: Registration Se Division of Con The Centre of T 2415 N. Monro Tallahassee, FL	rporations Fallahassee oe Street, Suite 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INVESTMENT EXPRISES LLC

INVESTIMENT EAUKES		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000047230</u> .	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PILLE PAINT OF SECRETAL AHASSES
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the na</u>	ame of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	Ziv 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>	Address	Type of Action
AMBR	FADHL A AYEDH	14511 DOVER FOREST DR. ORLANDO, FL 32828	B _ ≡ Add
			_ Remove
			🗆 Change
			□Add
			Remove
			□ Change
			_ □Add
			□Remove
			□Change
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			□Remove
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			□Remove
			CiChango

			
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fective date, if other than the din effective date is listed, the date must bote: If the date inserted in this bloc cument's effective date on the Dep	e specific and cannot be prior to date k does not meet the applicable st	(optional) of filing or more than 90 days after filing.) Pur atutory filing requirements, this date will	suant to 605.0207 not be listed as
ecord specifies a delayed effective of is filed.	date, but not an effective time, at	12:01 a.m. on the earlier of: (b) The 90	th day after the
ted 27TH OF JULY	. 2022		
	gnature of a member or authorized i	epresentative of a member	
•	ABDULSALAM ALA		
	Typed or printed nam		