

L19 000 190139

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(City/State/Zip/Phone #)

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JAN 27 2020

2020 JAN 27 PM 4:28

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*Handwritten signature*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 10, 2020

MANUEL NIEDAS  
2SFL EXPRESS LLC  
222 NW 13TH ST  
CAPE CORAL, FL 33993

SUBJECT: 2SFL EXPRESS LLC  
Ref. Number: L19000190139

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

ANY ADDRESS CHANGES MUST BE SHOWN ON PAGE 2 OF 3 UNDER AUTHORIZED PERSONS AUTHORIZED TO MANAGE. PLEASE DATE THE DOCUMENT ON PAGE 3 OF 3.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent  
Regulatory Specialist II

Letter Number: 620A00000666

2020 JAN 27 PM 2:46

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 2SFL 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:

MANUEL NIEDAS

\_\_\_\_\_  
Name of Person

2SFL EXPRESS LLC

\_\_\_\_\_  
Firm/Company

222 NW 13TH ST

\_\_\_\_\_  
Address

CAPE CORAL, FL 33993

\_\_\_\_\_  
City/State and Zip Code

SFLEXPRESS@HOTMAIL.COM

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

For further information concerning this matter, please call:

MANUEL NIEDAS

727 247-8577  
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 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**

2SFL 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 07/24/2019 and assigned  
Florida document number L19000190139.

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)

222 NW 13TH ST

CAPE CORAL, FL 33993

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

222 NW 13TH ST

CAPE CORAL, FL 33993

**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:

MANUEL NIEDAS

New Registered Office Address:

222 NW 13TH ST

*Enter Florida street address*

CAPE CORAL

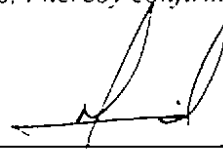
*City*

Florida 33993

*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

[illegible]

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

AUTHORIZED PERSON DETAILED: Manager new address is 222 NW 13TH ST, CAPE CORAL, FL 33993

[illegible]

**E. 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 01/21/20

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Signature of a member or authorized representative of a member

MANUEL NIEDAS

Typed or printed name of signee