

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : TRAMILEX LLC Account Number : 120150000086 : (786)469-9163

Fax Number

: (305)848-3716

Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please.

| Email | Address: | |
|-------|----------|--|
| | | |

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **REX SOX EXPRESS LLC**

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$25.00 |

K. SALY

NOV - 8 2024

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

| TO: | Registration Se Division of Co | ection rporations | | |
|-----------------|---|--|--|--|
| CUDIE | | EXPRESS LLC | | |
| SORTE | CI: | Name of Lin | nited Liability Company | |
| The enc | losed Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please r | eturn all correspo | ondence concerning this matter | to the following: | |
| | | YOSMANY BLAT SERA | A | |
| | | | Name of Person | |
| | | REX SOX EXPRESS LLO | C | |
| | | | Firm/Company | · • · |
| | | 1022 NW 87TH AVE BU | ILDING 05 APT 108 | |
| | | | Address | |
| | | MIAMI, FL 33172 | | |
| | | | City/State and Zip Code | |
| | | blatyosmany77@gmail.com | n to be used for future annual report not | Harrian) |
| For furth | ner information c | oncerning this matter, please c | • | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| YOSMZ | NNY BLAT | | 786 516-3414 | |
| | | f Person | at () Area Code Daytin | ne Telephone Number |
| | | | | |
| Enclosed | l is a check for th | ne 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 Fec. Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I | Section orporations 7 | Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL | porations fallahassee e Street, Suite 810 |

To:

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

FILED 2024 NOV -7 PM 3:07

REX SOX 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 07/01/2024 | and assigned |
|--|------------------------|---------------------------------|------------------------------------|
| Florida document number L19000216258 | , | | |
| This amendment is submitted to amend the fo | llowing: | | |
| A. If amending name, enter the new name | of the limited liabil | lity company here: | |
| N/A | | | |
| The new name must be distinguishable and contain the | words "Limited Liabili | ty Company," the designation | "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if appl | icable: | N/A | |
| Principal office address MUST BE A STRE | ET ADDRESS) | | |
| | | | |
| | | | |
| Enter new mailing address, if applicable: | | N/A | |
| Mailing address MAY BE A POST OFFICE | E BOX) | ·—- | |
| | | <u> </u> | |
| | | | |
| B. If amending the registered agent and/or agent and/or the new registered office addr | registered office ac | idress on our records, <u>e</u> | nter the name of the new register |
| gent and/of the new registered office addr | ess here. | | |
| Name of New Registered Agent: | YOSMANY BLAT SERA | | |
| New Registered Office Address: | AVE BUILDING 05 APT | 108 | |
| * | | Enter Florida street a | uldress |
| | MIAMI | | _, Florida <u>33172</u> |
| | | 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

Pege: 5 of 6 2024-11-07 18:03:11 GMT 13054022854 From: Enk Gor H 2 7 000 5 + (407 5)

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 |
|--------------|-------------------|-----------------------------|--|
| MGR | RUBISEIDA SERA | 1022 NW 87TH AVE BLD 5APT 8 | |
| | | MIAMI, FL 33172 | ■Remove |
| | | | Change |
| AMBR | YOSMANY BLAT SERA | 1022 NW 87TH AVE BLD 5APT 8 | ≣ Add |
| | | MIAMI, FL 33172 | □Remove |
| | | | □ Change |
| | | | DAdd |
| | | | TASTOR TO TO THE PROPERTY OF T |
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| | | | □Add |
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| | | | |
| | | | □Remove |
| | | | Πα |

To:

| Effective date, if other than the date of filing: 11/07/2024 (optional) 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 Note: 11th ed ate inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the focument's effective date on the Department of State's records. Trecord 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 dis filled. NOVEMBER 07th 2024 Signature of a member of authorized representative of a member. | _ | ∜A | | | | | | | |
|--|-----------------------|---|---|--|--|---|--|--|--------------------|
| ffective date, if other than the date of filing: 11/07/2024 (optional) 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) force. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the occument's effective date on the Department of State's records. 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 is filed. NOVEMBER 07th 2024 | | | | | | | | | |
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