L20000 96540

(Re	equestor's Name)	
(Ac	dress)	<u></u>
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	= #)
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(DX	ocument Number)	
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04/13/20--01026--030 **25.00



COVER LETTER

	istration Sec ision of Corp					
SUBJECT:	TONI EXPR					
SUBJECT.	····	Name of Lim	ited Liability Company	;		
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	dence concerning this matter	to the following:			
		JOSE A MIRANDA JR				
			Name of Person	1		 ,
		TONI EXPRESS LLC				
			Firm/Company			
		521 W 55 PL				
			Address	 		
HIALEAH, FL 33012						
		,	City/State and Zip C	Code		
		TONYJOSEMIRANDA@				
		E-mail address: (to be used for future ar	inual report noti	ication)	
For further in	nformation co	ncerning this matter, please c	all:			
JOSE A MI	RANDA JR		786 at (277-7384		
	Name of	Person	Area Code	Daytime	Telepho	ne Number
Enclosed is a	check for the	e following amount:				
■ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Certified Cop (additional copy) y		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Address gistration S			et Address: gistration Sec	ction	
Div	vision of Co	orporations	Div	ision of Cor	poratio	
). Box 6327 Ilahassee, F			e Centre of T 5 N. Monro		
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Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TONI EXPRESS LLC			
(<u>Name of the Lim</u>	ited Liability Company a (A Florida Limited Liabi	is it now appears on our records.) lity Company)	
The Articles of Organization for this Limited I Florida document number L20000096540	iability Company wer	re filed on <u>04/06/2020</u>	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability	company here:	
TONI EXPRESS LLC			
The new name must be distinguishable and contain the	words "Limited Liability C	Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STREET ADDRESS)			282
Timespat office unitess most me A STRE.	<u></u>		
			<u> </u>
Enter new mailing address, if applicable:	_		
(Mailing address MAY BE A POST OFFICE BOX)			
	_		<u>ب</u>
			
B. If amending the registered agent and/or agent and/or the new registered office addr	<u> </u>	ress on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:	JOSE A MIRAND	A JR	
New Registered Office Address:	521 W 55 PL		
		Enter Florida street address	
	HIALEAH	, Flori	ida 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>	Address	Type of Action
MGR	JOSE A MIRANDA JR	521 W 55 PL	≅ Add
		NIALEAH, FL 33012	□Remove
			Change
			□ Add
			□ Remove
			□ Change
			□Add
			□Remove
			Change
			□ Add
			□Remove
			□Change
			□Remove
			Change
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			Remove
			□ Changa

lf am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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lf an el Note:	O4/06/2020 (optional) Tective date, if other than the date of filing: (optional) (optional) Tective 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 ment's effective date on the Department of State's records.
e reco rd is f	rd 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 iled.
Dated	04/07/2020
	Signature of a member or authorized representative of a member
	JOSE A MIRANDA JR
	ICACIC O BATCA ARTO A TO

Filing Fee: \$25.00