

# L20000179323

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : PROMINENT SERVICES INC  
Account Number : I20150000063  
Phone : (305)889-2880  
Fax Number : (305)889-2881

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

Email Address: Underwriters@PST-companies.com

2020 JUN 15 PM 1:36

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
SHAHEENS EXPRESS LLC**

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## COVER LETTER

(H20000179323)

TO: Registration Section  
Division of Corporations

SUBJECT: SHAHEENS 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:

CYNTHIA VELASQUEZ

Name of Person

PROMINENT SERVICES INC

Firm/Company

6912 NW 72 AVE

Address

MIAMI, FL 33166

City/State and Zip Code

UNDERWRITERS@PSICOMPANIES.COM

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

For further information concerning this matter, please call:

CYNTHIA VELASQUEZ

at (305) 889-2880

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

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

**SHAHEENS 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 05/15/2020 and assigned  
 Florida document number L20000132523.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

SYED NAJEEBULLAH HUSSAINY

New Registered Office Address:

2971 OAK TREE LANE

*Enter Florida street address*

LAKELAND

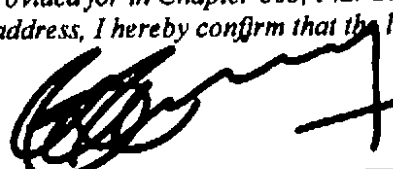
*City*

Florida 33810

*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**

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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>
MGR	HUSSAINY, SYED NAJEEBULL	2971 OAK TREE LANE	<input type="checkbox"/> Add
		LAKELAND, FL 33810	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	IDREES, RAMSHA	2971 OAK TREE LANE	<input type="checkbox"/> Add
		LAKELAND, FL 33810	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

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)  
\_\_\_\_\_ (If the date of filing is not the date of effectiveness, this date will not be listed as the

**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 June 12TH, 2020

*[Handwritten signature]*

Signature of a member or authorized representative of a member

HUSSAINY, SYED NAJEEBULLAH

Typed or printed name of signee

**Filing Fee: \$25.00**

Filing Fee: \$25.00  
(420000) - A.3231