La1000031876

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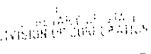
Registration Section

TO:

Division of Co	rporations		
USA EXPI	RESS HAULERS , LLC.		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	ROLANDO REYES		
		Name of Person	
	USA EXPRESS HAULER	RS, LLC.	
		Firm/Company	
	16622 SW 90TH ST		
		Address	-
	MIAMI, FL 33196		
		City/State and Zip Code	
	ROLY860712@GMAIL.Co	OM to be used for future annual report not	ification)
For further information	concerning this matter, please c		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	oncerning and matter, preuse o		
ROLANDO REYES	120	786 862-0252	Tible
Name (of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for t	he 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 Addre Registration Division of C P.O. Box 632	Section Corporations 27	Street Address: Registration So Division of Co The Centre of	rporations Tallahassee
Registration Division of C	Section Corporations 27	Registration So Division of Co The Centre of	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION LIVINGS OF JUNE CHARLES **OF**



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USA EXPRESS HAULERS, I	LLC.
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(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 L Florida document number L21000031876	• •	d on <u>01/14/2021</u>	and assigned
This amendment is submitted to amend the foll			
A. If amending name, enter the new name o	f the limited liability com	pany here:	
The new name must be distinguishable and contain the v	vords "Limited Liability Compa	ny," the designation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/or agent and/or the new registered office addre	C,	n our records, <u>enter the r</u>	name of the new registered
Name of New Registered Agent:	ROLANDO REYES		
New Registered Office Address:	16622 SW 90TH ST		
		Enter Florida street address	
	MIAMI	, Florida	33196
	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:

| Continue of the continue

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
AMBR	ROLANDO REYES	16622 SW 90TH ST	■Add
		MIAMI, FL 33196	□Remove
			☐ Change
AMBR	MARIA CARIDAD RUIZ	16622 SW 90TH ST	□ Add
		MIAMI, FL 33196	
			■ Change
			C]Add
			□Remove
			□Change
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ective date, if other than the effective date is listed, the date muse: If the date inserted in this blument's effective date on the De	t be specific and cannot be prior to ock does not meet the applicable	date of filing or more that le statutory filing requ	(optional) in 90 days after filing irements, this date	.) Pursuant to 605.020
smell seffective dute on the D	parment of state a records.			
ord specifies a delayed effective filed.	e date, but not an effective time	e, at 12:01 a.m. on the	earlier of: (b) Th	ne 90th day after the
APRIL IST	2021			
	Signature of a member or authoriz	milling	nember	
	arguature of a member of authoriz	era representative di a fi	icmoci	

Filing Fee: \$25.00