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(Re	equestor's Name)	
(Ad	ldress)	<u>-</u>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	≥ #)
PICK-UP	MAIT WAIT	MAIL
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Special Instructions to	Filing Officer:	
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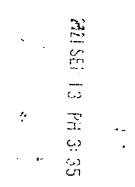
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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

	STONE EXPRESS, LLC		• •
30131261.	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Roselyn Soto		
		Name of Person	
	ROLLING STONE EXPR	ESS, LLC	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	66 SW 3rd Court		
		Address	
	Florida City		
		City/State and Zip Code	1.76
	rollingstonexpress@gmail.c	com to be used for future annual report no	
For further information	concerning this matter, please c	•	omeanony
Roselyn Soto		786 2984887	
Name o	of Person	at () Area Code Dayti	me 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration		Street Address: Registration S	ection
Division of C	Corporations	Division of Co	orporations
P.O. Box 6327		The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROLLING STONE EXPRESS, LLC

1421 827 13 PM 3: 05

(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our reco	ords.)
		₹
The Articles of Organization for this Limited Liabilit	y Company were filed on 7/30/21	and assigned
Florida document number L21000345072	·	
This amendment is submitted to amend the following	ç:	
A. If amending name, enter the new name of the l	limited liability company here:	
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DRESS)	
		·
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address her		er the name of the new regis
gent and/or the new registered office address ner	<u>c</u> .	
Name of New Registered Agent:		
Name of New Register Agent.		
New Registered Office Address:	Enter Florida street addr	rass
	City , 1	F lorida Zip Code
	City	zip Coae

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 221 SE 13 Pil	ე: ე <u>Type of Action</u>
AMBR	ROSELYN SOTO	66 SW 3RD COURT	
		FLORIDA CITY, FL 33034	
			Change
			🗆 Add
			□Remove
			☐ Change
			□Add
		-1-11-	🗆 Remove
			□ Change
	- 1		□ Add
			□ Remove
			Change
			Remove
			Change
·			🗆 Add
			□Remove
			□ Change

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(If an e <u>Note</u>	ive date, if other than the date of filing: [9/1/2021] [cetive 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) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
f the rece ecord is t	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 led.
	SEPTEMBER 9 TH 2021

Filing Fee: \$25.00

Typed or printed name of signee