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2022 APR -7 AM 6: 42
SECRETARY OF STATE
TALLAHASSEE, FL

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COVER LETTER

TO: Registration Se Division of Cor			
Wilmar Exp	oress, LLC		,
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ondence concerning this matter t	o the following:	
	Ceylin Duran		
		Name of Person	
	Wilmar Express, LLC		
		Firm/Company	
	8100 West 28th Court, Unit	110	
		Address	
	Hialeah, Fl. 33018		
	Wilmar.gallart@yahoo.com	City/State and Zip Code	
	-	to be used for future annual report n	otification)
For further information of	concerning this matter, please ca	all:	
Ceylin Duran		786 668-0383	
	CD	at () Area Code Davi	ime Telephone Number
Name (of Person	Area Code Day	mile Telephone Number
Enclosed is a check for t	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 Addre		Street Address:	
Registration Division of 0		Registration (Division of C	
P.O. Box 63		The Centre o	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 APR -7 AM 6: 42

Wilmar Express	SECRETARY OF STATE
(Name of the Limited	Liability Company as it now appears on our FAdord HASSEE, FL. Florida Limited Liability Company)
The Articles of Organization for this Limited Liab Florida document number	oility Company were filed on and assigned
This amendment is submitted to amend the follow	ving:
A. If amending name, enter the new name of t	he limited liability company here:
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicat	ole:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE B	<u></u>
B. If amending the registered agent and/or regagent and/or the new registered office address	gistered office address on our records, <u>enter the name of the new registered</u> here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	*** * *
	, Florida 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 amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Wilmar Gallart	8100 West 28th Court, Unit 110, Hialcah, Fl 33018	≅ Add
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Effective date, if other than t (If an effective date is listed, the date r	he date of filing:	or to date of filing or more	(optional)	to 605 0207 (3)(b)
Note: If the date inserted in this document's effective date on the	block does not meet the appl	icable statutory filing re	equirements, this date will not b	pe listed as the
document 5 circuit cade on the	Department of State 3 record			
the record specifies a delayed effec	tive date, but not an effective	time, at 12:01 a.m. on	the earlier of: (b) The 90th da	y after the
ecord is filed.				
assid is finda.				
April 01 Dated	2022			