L22 CCO078443

| (Requestor's Name) |
|---|
| |
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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SECRETARY OF STATE OIVISION OF CORPORALIONS

T. MATTHEWS MAY 1 1 2022

COVER LETTER

TO: Registration Section

Division of Corporations

RECEIVED

| | NA XPRESS LLC | | 2022 APR 15 AM 7: 54 |
|---|--|---|--|
| | Name of Lin | nited Liability Company | SECRE MAN STATE |
| The enclosed Articles o | f Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | 1 |
| | GREISY SUAREZ | | |
| | | Name of Person | |
| | DIRECT SOLUTION SE | | |
| | | Firm/Company | |
| | 1248 Viscaya Pkwy | | <u> </u> |
| | | Address | |
| | Cape Corat, FL 33990 | | 1 |
| | | City/State and Zip Code | |
| | info@directsolutionservice | | · · · · · · · · · · · · · · · · · · · |
| | | to be used for future annual report i | notification) |
| For further information | concerning this matter, please c | all: | t . |
| GREISY SUAREZ | | 239 443-5846 at () | 1 |
| Name | of Person | Area Code Day | time 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 radditional copy is enclosed) | S60,00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclosed) |
| <u>Mailing Addre</u> Registration Division of G | Section | Street Address: Registration 1 Division of O | Section |
| P.O. Box 63 Tallahassee. | 27 | The Centre o | f Tallahassee rroe Street, Suite 810 |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

4

22 MAY 10 PH 2: 38

| A INDIANAS A | 3 * * * * * | | | |
|--------------|-------------|------|-----|--|
| ADRIANNA | . N 1 140 | 1.55 | 1.1 | |

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Fiability Company)

| Florida document number L22000078493 | .iability Company were filed on $\frac{02}{12}$ | and assigned |
|---|---|--|
| r iorida document number | · | 1 |
| This amendment is submitted to amend the fol | lowing: | |
| A. If amending name, enter the new name of | of the limited liability company he | <u>re</u> : |
| The new name must be distinguishable and contain the | words "Limited Liability Company," the de- | signation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if appli | cable: | |
| (Principal office address MUST BE A STRE | ET ADDRESS) | |
| | | |
| | | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE | <u></u> | :1 |
| | | + |
| B. If amending the registered agent and/or agent and/or the new registered office addre | | cords, enter the name of the new registered |
| | GONZALEZ MARRERO, ANICE | ETO FRANCISCO |
| Name of New Registered Agent: | | · · · · · · · · · · · · · · · · · · · |
| | 4608 LEE BLVD | |
| Name of New Registered Agent: New Registered Office Address: | 4608 LEE BLVD | da street address |
| | 4608 LEE BLVD Enter Flori LEHIGH ACRES | da street address . Florida 33971 |
| New Registered Office Address: | 4608 LEE BLVD Enter Flori LEHIGH ACRES City | · |
| | 4608 LEE BLVD Enter Fiori LEHIGH ACRES City Registered Agent: | da street address Florida 33971 Zip Code |

AMBR = Authorized Member

22 MAY 10 PM 2: 39

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---------------------------------------|------------------------|----------------|
| AMBR | GONZALEZ MARRERO (ANICE, O) FRANCISCO | 4608 LEE BLVD | □ Add |
| | | LEHIGH ACRES, FL 33971 | Remove |
| | | | |
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| FILED STATE OF STATE OF CORPORATIONS | d |
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| If amending any other information, enter change(s) here: (Attach addition) Phoens, if necessary, 22 HAY 10 |) (|
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| Effective date, if other than the date of filing: | 1 |
| Effective date, if other than the date of filing: | Pursuant to 605.0207 (3 vill not be listed as th |
| e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The ed is filed. | 90th day after the |
| Dated APRIL 04 | |
| Signature of a member or authorized representative of a member | - j |
| FRANCISCO ANICETO, GONZALEZ MARRERO | 1 |
| Typed or printed name of signee | |

Filing Fee: \$25.00