

L22000135253

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

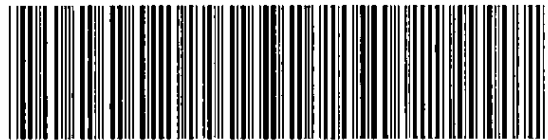
(Business Entity Name)

(Document Number)

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FILED
TALLAHASSEE, FLORIDA

2024 OCT 24 PM 4:20

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ~~Ashley Express Services LLC.~~ Ashley Express Services 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:

Brayan S Rivas Perez

Name of Person

Firm/Company

~~1239 Northwest 32nd Pl~~

1239 NW 32nd Pl

Address

~~Miami, 33125~~

Miami, FL 33125

City/State and Zip Code

~~forashleyexpress@gmail.com~~

Forashleyexpress@gmail.com

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

For further information concerning this matter, please call:

Brayan Rivas

at (

305

Area Code

804-1609

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

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

FILED

Ashley Express Services LLC.

2024 OCT 24 PM 4: 20

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

TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 10/10/2024 and assigned
Florida document number L22000135253.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Ashley Carrier LLC

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)

381 Liberty Street, Apartment 101

Sharon, PA 16146 - Sharon, PA 16146

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:

New Registered Office Address:

Enter Florida street address

City, 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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Brayan S Rivas Perez	381 Liberty Street, Apartment 101	<input type="checkbox"/> Add
		Sharon, PA 16146 - Sharon, PA 16146	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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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.

Dated October 10, 2024

[Signature]

Brayan S Rivas Perez

Filing Fee: \$25.00